

1.) CORPORATION NAME: <b>House Of Blessings Holiness Church, Inc.</b>	DUE DATE: <b>5/31/2015</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>LISA BLAIR-WALLER 5887 MONTPELIER DRIVE WILLIAMSBURG, VA</b>	SCC ID NO: <b>07236789</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>JAMES CITY COUNTY</b>	5.) STOCK INFORMATION CLASS <input type="text"/> AUTHORIZED <input type="text"/>
4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2540 HAYES ROAD

CITY/ST/ZIP: HAYES, VA 23072

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: DAMIEN BURNO AUGUSTIN TITLE: OFFICER ADDRESS: 96 RIVER PALMS ROAD CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23608	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: MARY AUGUSTIN TITLE: OFFICER ADDRESS: 96 RIVER PALMS ROAD CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23608	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: JOANNE TATE TITLE: OFFICER ADDRESS: 24 ROSEBRIAR PL CITY/ST/ZIP/CO: HAMPTON, VA 23666	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR	
NAME: LISA BLAIR-WALLER TITLE: DIRECTOR ADDRESS: 5887 MONTPELIER DRIVE CITY/ST/ZIP/CO: WILLIAMSBURG, VA 23188	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR	

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ DAMIEN BURNO AUGUSTIN	DAMIEN BURNO AUGUSTIN, OFFICER	10/5/2015
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.