

1.) CORPORATION NAME:

**KINGDOM LIVING WORSHIP CENTER, INC.**

DUE DATE: **10/31/2011**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DIRECTOR  
JONATHAN ELLIOT TOLLIVER  
122 SCHOONER DR  
HAMPTON, VA 23669**

SCC ID NO: **07411051**

5.) STOCK INFORMATION

|       |            |
|-------|------------|
| CLASS | AUTHORIZED |
|-------|------------|

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HAMPTON CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P. O. BOX 9241

CITY/ST/ZIP: HAMPTON, VA 23670-

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: LENIS D GUESS IV  
TITLE: PRESIDENT  
ADDRESS: 2414 PARISH AVE  
CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23607-

OFFICER  DIRECTOR

NAME: JONATHAN TOLLIVER  
TITLE: VICE PRESIDENT  
ADDRESS: 122 SCHOONER DR  
CITY/ST/ZIP/CO: HAMPTON, VA 23669-

OFFICER  DIRECTOR

NAME: VALERIE GUESS  
TITLE: TREASURER  
ADDRESS: 114 LOOKOUT CIRCLE  
CITY/ST/ZIP/CO: SUFFOLK, VA 23435-

OFFICER  DIRECTOR

NAME: SELENA ANN HENRY-STROUD  
TITLE: ASST TREASURER  
ADDRESS: 486 WYN DR  
CITY/ST/ZIP/CO: NEWPORT NEWS, VA 23608-

OFFICER  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/ VALERIE GUESS

VALERIE GUESS, TREASURER

10/31/2011

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.