

1.) CORPORATION NAME:

Grace United Family Church

DUE DATE: **4/30/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**ELTON VAN WELTON
LAW AND GRACE LLC
528 PAGE ST**

SCC ID NO: **07496912**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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BERRYVILLE, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

CLARKE COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9175 TAZEWEKK GREEB DR

CITY/ST/ZIP: MECHANICSVILLE, VA 23116

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:	GLENN HAWKINS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	9175 TAZEWELL GREEN DRIVE		
CITY/ST/ZIP/CO:	MECHANICSVILLE, VA 23116		

NAME:	TINA TUPPER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	1413 NORTHBURY AVE		
CITY/ST/ZIP/CO:	HENRICO, VA 23231		

NAME:	CHRIS MOLENKAMP	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	9338 SADDLE COURT		
CITY/ST/ZIP/CO:	MECHANICSVILLE, VA 23116		

NAME:	WENDY ASCHENBACH	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9226 FAIR HILL COURT		
CITY/ST/ZIP/CO:	MECHANICSVILLE, VA 23116		

NAME:	RON BATES	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	6003 SABER COURT		
CITY/ST/ZIP/CO:	MECHANICSVILLE, VA 23111		

NAME:	KATHERINE HAWKINS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9175 TAZEWELL GREEN DR		
CITY/ST/ZIP/CO:	MECHANICSVILLE, VA 23116		

NAME: SANDRA HELMICK TITLE: DIRECTOR ADDRESS: 3043 SMOKEY RD CITY/ST/ZIP/CO: AYLETT, VA 23009	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: GREG KENNEDY TITLE: DIRECTOR ADDRESS: 8130 FALLING LEAF CT CITY/ST/ZIP/CO: MECHANICSVILLE, VA 23111	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: RUSTY MOLENKAMP TITLE: DIRECTOR ADDRESS: 9338 SADDLE COURT CITY/ST/ZIP/CO: MECHANICSVILLE, VA 23116	<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/ GLENN HAWKINS	GLENN HAWKINS, PRESIDENT	4/28/2015		
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.				