

<b>SCC eFile</b>	<b>2014 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION</b>	214552962
1.) CORPORATION NAME: <b>LIVING WAY CHRISTIAN CENTER</b>		DUE DATE: <b>4/30/2014</b>
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>EBO DUKER 14506 BLACKHORSE CT CENTREVILLE, VA</b>		SCC ID NO: <b>07498520</b>
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>FAIRFAX 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: 14506 BLACKHORSE CT  CITY/ST/ZIP: CENTREVILLE, MA 20120		
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: DAVID K AYESIYENGA TITLE: PRESIDENT/DIR ADDRESS: 4 HOLMAN ST CITY/ST/ZIP/CO: ATTLEBORO, MA 02703	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MARGARET DUKER TITLE: TREASURER ADDRESS: 14506 BLACKHORSE CT CITY/ST/ZIP/CO: CENTREVILLE, VA 20120	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: EBO DUKER TITLE: CLERK/DIRECTOR ADDRESS: 14506 BLACKHORSE CT CITY/ST/ZIP/CO: CENTREVILLE, VA 20120	<input checked="" 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/ EBO DUKER	EBO DUKER, CLERK/DIRECTOR	12/12/2014
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.		