

SCC eFile

2015 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

215524051

1.) CORPORATION NAME:

**According To His Purpose Ministries, Incorporated**

DUE DATE: **6/30/2015**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**DARLA L PUREFOY  
419 W THOMAS STREET  
PO BOX 206**

SCC ID NO: **07522170**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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**BRODNAX, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**MECKLENBURG COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: PO BOX 206  
419 W THOMAS ST

CITY/ST/ZIP: BRODNAX, VA 23920

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:	REV DARLA L PUREFOY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHRMN/BD OF DIR		
ADDRESS:	PO BOX 206		
CITY/ST/ZIP/CO:	BRODNAX, VA 23920		

NAME:	REV CARTER L RODGERS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	PO BOX 80		
CITY/ST/ZIP/CO:	BRODNAX, VA 23920		

NAME:	REV TYRONE A SAMUEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	327 HILL RD		
CITY/ST/ZIP/CO:	WHITEHALL, PA 18052		

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.

<u>/s/ REV DARLA L PUREFOY</u>	<u>REV DARLA L PUREFOY,</u>	<u>6/24/2015</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	CHRMN/BD OF DIR 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.