

1.) CORPORATION NAME:

AFS of Lebanon, Inc. (USED IN VA BY: AFS of Lebanon)

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060**

DUE DATE: **1/31/2011**

SCC ID NO: **F1535527**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
NV

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5228 VALLEY POINT PKWY
BLDG B, STE 1

CITY/ST/ZIP: ROANOKE, VA 24019-

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	THOMAS M CLARKE	
TITLE:	PRESIDENT	
ADDRESS:	5228 VALLEY POINT PKWY BLD B STE 1	
CITY/ST/ZIP/CO:	ROANOKE, VA 24019-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	REV DAVID ERICKSON	
TITLE:	DIRECTOR	
ADDRESS:	3483 LIBERTY	
CITY/ST/ZIP/CO:	BALTIMORE, MD 21224-	

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	LYNN HODGE	
TITLE:	CHAIRMAN	
ADDRESS:	1001 GENTER ST UNIT B	
CITY/ST/ZIP/CO:	LA JOLLA, CA 92037-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	SAM RASOUL	
TITLE:	TREASURER	
ADDRESS:	5228 VALLEYPONTE PKWY BLDG B SUITE 1	
CITY/ST/ZIP/CO:	ROANOKE, VA 24019-	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	ROBERT BELL	
TITLE:	PRESIDENT	
ADDRESS:	5228 VALLEY POINT PKWY BLDG B STE 1	
CITY/ST/ZIP/CO:	ROANOKE, VA 24019-	

NAME:	WAYNE FUQUAY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5228 VALLEYPOINTE PKWY		
	BLDG B, SUITE 1		
CITY/ST/ZIP/CO:	ROANOKE, VA 24019-		

NAME:	ANA CLARKE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5228 VALLEYPOINTE PKWY		
	BLDG B, SUITE 1		
CITY/ST/ZIP/CO:	ROANOKE, VA 24019-		

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/ SAM RASOUL</u>	<u>SAM RASOUL, TREASURER</u>	<u>1/21/2011</u>
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.