

SCC eFile

2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

212531958

1.) CORPORATION NAME:

**America's Charities**

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**BUSINESS FILINGS INCORPORATED  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1563495**

5.) STOCK INFORMATION

CLASS  AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DC**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 14150 NEWBROOK DRIVE  
STE 110

CITY/ST/ZIP: CHANTILLY, VA 20151

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: STEVE DELFIN  OFFICER  DIRECTOR  
TITLE: PRESIDENT  
ADDRESS: 14150 NEWBROOK DR.  
SUITE 110  
CITY/ST/ZIP/CO: CHANTILLY, VA 20151

NAME: ERLINE BELTON  OFFICER  DIRECTOR  
TITLE: PRESIDENT  
ADDRESS: 41 HAWTHORNE ST  
CITY/ST/ZIP/CO: ROXBURY, MA 02119

NAME: SOOK SURGAI  OFFICER  DIRECTOR  
TITLE: COMPTROLLER  
ADDRESS: 14150 NEWBROOK DRIVE  
SUITE 110  
CITY/ST/ZIP/CO: CHANTILLY, VA 20151

NAME: MARICIA L BULLARD  OFFICER  DIRECTOR  
TITLE: Board Chair  
ADDRESS: 7950 JONES BRANCH DR  
CITY/ST/ZIP/CO: MCLEAN, VA 22107

NAME: LEON FEINERMAN  OFFICER  DIRECTOR  
TITLE: DIRECTOR  
ADDRESS: 4550 LENA DR  
CITY/ST/ZIP/CO: MECHANICSBURG, PA 17055

NAME: Thomas Gregory  OFFICER  DIRECTOR  
TITLE: SECRETARY  
ADDRESS: 14100 Crawford Street  
CITY/ST/ZIP/CO: Boys Town, NE 68010

NAME: Arnold Swope TITLE: VICE PRESIDENT ADDRESS: 14150 newbrook dr. #110 CITY/ST/ZIP/CO: Chantilly, VA 20151	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: Robert Dunfey TITLE: TREASURER ADDRESS: 14150 newbrook #110 CITY/ST/ZIP/CO: chantilly, VA 20151	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: chuck bolte TITLE: DIRECTOR ADDRESS: 14150 newbrook dr #110 CITY/ST/ZIP/CO: chantilly, VA 20151	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: richard glasow TITLE: DIRECTOR ADDRESS: 14150 newbrook dr #110 CITY/ST/ZIP/CO: chantilly, VA 20151	<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/ STEVE DELFIN SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	STEVE DELFIN, PRESIDENT PRINTED NAME AND CORPORATE TITLE	8/22/2012 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.		