2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009144

FILED Apr 29, 2011 Secretary of State

Entity Name: SHECHANIAH RIVERS/SILVA S. STRACHAN MINISTRIES, INC.

Current Principal Place of Business: New Principal Place of Business:

998 J CLYDE MORRIS BLVD. NEWPORT NEWS, VA 23601

Current Mailing Address: New Mailing Address:

P.O. BOX 6631 NEWPORT NEWS, VA 23606

FEI Number: 75-3152815 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ANGELA, GAYLES 1500 CALMING WATERS DR 703 FLEMING ISLAND, FL 32003 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: DERICO, KENNDRA
Address: 3150 CAMBRIEN TERRECE
City-St-Zip: AUSTELL, GA 30106 US

Title:

Name: GATLING, TAMICA M
Address: 998 J CLYDE MORRIS BLVD
City-St-Zip: NEWPORT NEWS, VA 23601

Title: M

Name: BAILEY, ANTIONETTE
Address: 998 J CLYDE MORRIS BLVD
City-St-Zip: NEWPORT NEWS, FL 23601

Title: M

Name: KING, WILLIAM Address: 11 GAMBOL DRIVE

City-St-Zip: NEWPORT NEWS, VA 23601

Title:

Name: WHITAKER, SILVA S Address: P. O BOX 6631

City-St-Zip: NEWPORT NEWS, VA 23606

Title: N

Name: STRACHAN, KEVIN E Address: P. O. BOX 6631

City-St-Zip: NEWPORT NEWS, VA 23606

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANGELA GAYLES RA 04/29/2011