

SCC eFile

**2013 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

213547952

1.) CORPORATION NAME:

**Vega East, Ltd.**

DUE DATE: **12/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JAMES L VICK  
3535 VENABLE RD  
KENTS STORE, VA**

SCC ID NO: **05505805**

5.) STOCK INFORMATION

| CLASS  | AUTHORIZED |
|--------|------------|
| COMAV  | 1,000      |
| COMBNV | 4,000      |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**FLUVANNA COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**VA**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3535 VENABLE ROAD

CITY/ST/ZIP: KENTS STORE, VA 23084-2416

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: JAMES L VICK                         |   |  |
| TITLE: PRES/S/T/COB                        |   |  |
| ADDRESS: 3535 VENABLE ROAD                 |   |  |
| CITY/ST/ZIP/CO: KENTS STORE, VA 23084-2416 |   |  |

|                                   |   |  |
|-----------------------------------|---|--|
|                                   | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TERESA A TAYLOR-HUGHES      |   |  |
| TITLE: 1ST VP                     |   |  |
| ADDRESS: 3750 MORNING CREST WAY   |   |  |
| CITY/ST/ZIP/CO: CUMMING, GA 30041 |   |  |

|  |   |  |
|--|---|--|
|  | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: PAMELA K VICK                        |   |  |
| TITLE: 3RD VP                              |   |  |
| ADDRESS: 3535 VENABLE ROAD                 |   |  |
| CITY/ST/ZIP/CO: KENTS STORE, VA 23084-2416 |   |  |

|                                   |   |  |
|-----------------------------------|---|--|
|                                   | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: TANA M WEIL                 |   |  |
| TITLE: 2ND VP                     |   |  |
| ADDRESS: 2009 TRADD CT            |   |  |
| CITY/ST/ZIP/CO: RALEIGH, NC 27607 |   |  |

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/ JAMES L VICK                                    | JAMES L VICK, PRES/S/T/COB       | 10/16/2013 |
| 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.