

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213510280				
1.) CORPORATION NAME: HOLDEN INSURANCE AGENCY, INC.		DUE DATE: 2/28/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: STEPHEN K LEWELLYN 122 WEST CAMERON ST PO BOX 1147 CULPEPER, VA 22701		SCC ID NO: 06324149 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>5,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	5,000
CLASS	AUTHORIZED					
COMMON	5,000					
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: CULPEPER COUNTY						
4.) STATE OR COUNTRY OF INCORPORATION: VA						
6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 605 SO MAIN STREET CITY/ST/ZIP: CULPEPER, VA 22701						
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: ALAN K PLACE TITLE: PRESIDENT ADDRESS: 20358 MILLER DR CITY/ST/ZIP/CO: CULPEPER, VA 22701	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR				
NAME: PAMELA G GEER TITLE: VICE PRESIDENT ADDRESS: 232 GEER LANE CITY/ST/ZIP/CO: BRIGHTWOOD, VA 22715	<input checked="" 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/ PAMELA G GEER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PAMELA G GEER, VICE PRESIDENT PRINTED NAME AND CORPORATE TITLE	2/27/2013 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.						