

SCC eFile	2013 ANNUAL REPORT COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION	213544788
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1.) CORPORATION NAME: WILLIAM GAMMON INSURANCE AGENCY, INC.	DUE DATE: 5/31/2013				
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: TRAC - THE REGISTERED AGENT COMPANY 201 N. UNION STREET SUITE 140 ALEXANDRIA, VA	SCC ID NO: F1548595				
3.) CITY OR COUNTY OF VA REGISTERED OFFICE: ALEXANDRIA CITY	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>10,000</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	10,000
CLASS	AUTHORIZED				
COMMON	10,000				
4.) STATE OR COUNTRY OF INCORPORATION: TX					

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1615 GUADALUPE

CITY/ST/ZIP: AUSTIN, TX 78701

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: WILLIAM GAMMON III TITLE: Mnging Director ADDRESS: 1615 GUADALUPE CITY/ST/ZIP/CO: AUSTIN, TX 78701		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: GEORGE MADISON BERRY TITLE: Mnging Director ADDRESS: 1615 GUADALUPE CITY/ST/ZIP/CO: AUSTIN, TX 78701		

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/ WILLIAM GAMMON III	WILLIAM GAMMON III, Mnging Director	9/25/2013
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.