

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213527033

1.) CORPORATION NAME:

Price and Ramey, Incorporated

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**TERRY KILGORE
197 WEST JACKSON ST
GATE CITY, VA**

SCC ID NO: **F1757865**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

SCOTT COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

TN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1524 BRIDGEWATER LN STE 101

CITY/ST/ZIP: KINGSPOUR, TN 37660

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:	BENJAMIN CHRISTIAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	115 CAVALIER DR		
CITY/ST/ZIP/CO:	GATE CITY, VA 24251		
NAME:	MALCOLM K SIMS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	433 ARROWHEAD DR		
CITY/ST/ZIP/CO:	KINGSPOUR, TN 37664		
NAME:	BRADLEY W JENKINS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VP OF SALES		
ADDRESS:	117 LUXURY LANE		
CITY/ST/ZIP/CO:	DANDRIDGE, TN 37725		
NAME:	MELISSA GREGG	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	282 RIDGEVIEW DR		
CITY/ST/ZIP/CO:	GRAY, TN 37615		
NAME:	GENELL CRADIC	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	267 CROCKET DR		
CITY/ST/ZIP/CO:	CHURCH HILL, TN 37642		
NAME:	DENNIS BEAMER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1608 IDLEWILD DR		
CITY/ST/ZIP/CO:	JOHNSON CITY, TN 37601		

NAME: ALAUNA PEARCE TITLE: DIRECTOR ADDRESS: 7914 GLEASON DR #1148 CITY/ST/ZIP/CO: KNOXVILLE, TN 37919	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ERNIE HORNER TITLE: DIRECTOR ADDRESS: P.O.BOX 1007 CITY/ST/ZIP/CO: MORRISTOWN, TN 37816	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LINDA NICHOLS TITLE: DIRECTOR ADDRESS: 600 MCCLELLAN CIRCLE CITY/ST/ZIP/CO: ELIZABETHTON, TN 37643	<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/ MELISSA GREGG SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MELISSA GREGG, TREASURER PRINTED NAME AND CORPORATE TITLE	6/10/2013 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.		