

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000234

Entity Name: DOMINION PRODUCTS AND SERVICES, INC.**Current Principal Place of Business:**120 TREDEGAR STREET
RICHMOND, VA 23219**Current Mailing Address:**120 TREDEGAR ST
RICHMOND, VA 23219 US**FEI Number:** 25-1781718**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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**Officer/Director Detail :**

Title	DIRECTOR
Name	REID, CARTER M
Address	100 TREDEGAR STREET
City-State-Zip:	RICHMOND VA 23219

Title	PRESIDENT
Name	HATHAWAY, SCOT C
Address	120 TREDEGAR STREET
City-State-Zip:	RICHMOND VA 23219

Title	SENIOR VICE PRESIDENT AND TREASURER
Name	CHAPMAN, JAMES
Address	100 TREDEGAR STREET
City-State-Zip:	RICHMOND VA 23219

Title	VP
Name	MILES, MORENIKE K
Address	100 TREDEGAR STREET
City-State-Zip:	RICHMOND VA 23219

Title	SECRETARY
Name	REID, CARTER M
Address	100 TREDEGAR STREET
City-State-Zip:	RICHMOND VA 23219

Title	ASST. SECRETARY
Name	DOGGETT, KAREN W
Address	100 TREDEGAR STREET
City-State-Zip:	RICHMOND VA 23219

Title	VP
Name	SHOWALTER, ALMA W
Address	701 E. CARY ST.
City-State-Zip:	RICHMOND VA 23219

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KAREN W. DOGGETT**ASSISTANT SECRETARY** 04/05/2017_____
Electronic Signature of Signing Officer/Director Detail_____
Date