

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 12, 2006 08:00 AM
Secretary of State

DOCUMENT # F02000000271

1. Entity Name
DIRECT LINE CORPORATION OF VIRGINIA



Principal Place of Business

**14 BRYANT COURT
STERLING, VA 20166**

Mailing Address

**P.O. BOX 1759
STERLING, VA 20167-1759**



07052006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
52-0946662

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

000000569660
07/12/06-80009-011 150.00

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PTCD
DOWNS, DAVID W
14 BRYANT COURT
STERLING, VA 20166**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SD
DOWNS, BONNIE S
9723 SPRING RIDGE LANE
VIENNA, VA 22182**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SPEYER, STUART
ONE CASTLEWOOD COURT
NASHVILLE, TN 37215**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

David W. Downs, President

07/05/06

703/234-0707

Daytime Phone #