2012 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2012
Secretary of State

DOCUMENT# F08000000234

Entity Name: DOMINION PRODUCTS AND SERVICES, INC.

Current Principal Place of Business:

120 TREDEGAR STREET
RICHMOND, VA 23219

New Principal Place of Business:

Current Mailing Address:

ATTN: VERA THOMS
P. O. BOX 26532
RICHMOND, VA 23219

New Mailing Address:

FEI Number: 25-1781718 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D
Name: KOONCE, PAUL D
Address: 120 TREDEGAR STREET
City-St-Zip: RICHMOND, VA 23219

Title: P
Name: KOONCE, PAUL D
Address: 120 TREDEGAR STREET
City-St-Zip: RICHMOND, VA 23219

Title: SVPT
Name: HETZER, G. SCOTT
Address: 100 TREDEGAR STREET
City-St-Zip: RICHMOND, VA 23219

Title: VP
Name: CARNEY, JAMES P
Address: 100 TREDEGAR STREET
City-St-Zip: RICHMOND, VA 23219

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

Title: AS
Name: BURR, SHARON L
Address: 100 TREDEGAR STREET
City-St-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: SHARON L. BURR AS 04/27/2012

Electronic Signature of Signing Officer or Director — Date