

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001288

FILED
Jun 15, 2020
Secretary of State
6716218218CC

Entity Name: DIRECT GENERAL INSURANCE COMPANY

Current Principal Place of Business:

8604 ALLISONVILLE ROAD
CASTLE CREEK 1, STE 130
INDIANAPOLIS, IN 46250

Current Mailing Address:

5630 UNIVERSITY PARKWAY
WINSTON-SALEM, NC 27105 US

FEI Number: 62-1695059

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 EAST GAINES STREET
TALLAHASSEE, FL 32399 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 CAO
Name BOLAR, DONALD
Address 5630 UNIVERSITY PARKWAY
City-State-Zip: WINSTON SALEM NC 27105

Title CCO
Name HALL, GEORGE JR
Address 5630 UNIVERSITY PARKWAY
City-State-Zip: WINSTON SALEM NC 27105

Title D
Name THOMAS, GREGORY
Address 201 NORTH ILLINOIS STREET, 16TH
 FLOOR SOUT
City-State-Zip: INDIANAPOLIS IN 46204

Title DIRECTOR
Name KARFUNKEL, BARRY
Address 59 MAIDEN LANE, 38TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR, CFO, TREASURER
Name WEINER, MICHAEL
Address 59 MAIDEN LANE, 38TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR, GENERAL COUNSEL AND
 SECRETARY
Name WEISSMANN, JEFFREY
Address 59 MAIDEN LANE, 38TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title DIRECTOR, COO
Name RENDALL, PETER
Address 59 MAIDEN LANE, 38TH FLOOR
City-State-Zip: NEW YORK NY 10038

Title PRESIDENT
Name KARFUNKEL, ROBERT
Address 59 MAIDEN LANE, 38TH FLOOR
City-State-Zip: NEW YORK NY 10038

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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: MICHAEL GOLDSTEIN

SVP, TAX

06/15/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title SVP. TAX
Name GOLDSTEIN, MICHAEL
Address 59 MAIDEN LANE, 38TH FL
City-State-Zip: NEW YORK NY 10038