

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212526294

1.) CORPORATION NAME:

OLD DOMINION INSURANCE AGENCY, INC.

DUE DATE: **7/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOEL K FRAZIER
1555 COMMERCE RD STE D
PO BOX 40**

SCC ID NO: **02586600**

VERONA, VA 24482

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,500

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

STAUNTON CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1555 COMMERCE ROAD SUITE D
PO BOX 40

CITY/ST/ZIP: VERONA, VA 24482

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: VIRGIL F REID
TITLE: DIRECTOR
ADDRESS: 775 BAILEY RD
CITY/ST/ZIP/CO: FT. DEFIANCE, VA 24437

OFFICER DIRECTOR

NAME: JOEL K FRAZIER
TITLE: PRESIDENT
ADDRESS: 822 BAILEY ROAD
CITY/ST/ZIP/CO: FT DEFIANCE, VA 24437

OFFICER DIRECTOR

NAME: JENNIFER R. FRAZIER
TITLE: TREASURER
ADDRESS: 822 BAILEY ROAD
CITY/ST/ZIP/CO: FT DEFIANCE, VA 24437

OFFICER DIRECTOR

NAME: ANNE R REID
TITLE: SECRETARY
ADDRESS: 775 BAILEY RD
CITY/ST/ZIP/CO: FT. DEFIANCE, VA 24437

OFFICER 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/ VIRGIL F REID

VIRGIL F REID, DIRECTOR

7/16/2012

SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT

PRINTED NAME AND CORPORATE TITLE

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.