

SCC eFile

2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

212534822

1.) CORPORATION NAME:

DOMINION OFFICE PRODUCTS, INC.

DUE DATE: **9/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**EWELL J OWENS
214 WEST MAIN STREET
PO BOX 760**

SCC ID NO: **03466786**

LEBANON, VA 24266

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	4,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RUSSELL COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 281 W MAIN ST
PO BOX 760

CITY/ST/ZIP: LEBANON, VA 24266

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:	EWELL J OWENS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	1115 CREEKSIDE DRIVE		
CITY/ST/ZIP/CO:	LEBANON, VA 24266		

NAME:	EDGAR E OWENS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	S/T		
ADDRESS:	PO BOX 1901		
CITY/ST/ZIP/CO:	WISE, VA 24293		

NAME:	EWELL J OWENS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	OFFICER		
ADDRESS:	PO BOX 760		
CITY/ST/ZIP/CO:	LEBANON, VA 24266		

NAME:	EDGAR E OWENS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	OFFICER		
ADDRESS:	PO BOX 1901		
CITY/ST/ZIP/CO:	WISE, VA 24293		

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/ EDGAR E OWENS	EDGAR E OWENS, S/T	9/11/2012
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.