

1.) CORPORATION NAME:

Dominion Generation Corporation

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX ROAD, SUITE 285
GLEN ALLEN, VA**

SCC ID NO: **05591417**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 120 TREDEGAR STREET

CITY/ST/ZIP: RICHMOND, VA 23219

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:	DAVID A CHRISTIAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	120 TREDEGAR ST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	Katheryn B. Curtis	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP		
ADDRESS:	5000 Dominion Boulevard		
CITY/ST/ZIP/CO:	Glen Allen, VA 23060		
NAME:	BECKY C. MERRITT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP SHARED SVCS.		
ADDRESS:	100 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	G SCOTT HETZER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP and TREAS.		
ADDRESS:	100 TREDEGAR ST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	JOHN L. NEWMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	100 TREDEGAR STREET		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		
NAME:	KAREN W DOGGETT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	100 TREDEGAR ST		
CITY/ST/ZIP/CO:	RICHMOND, VA 23219		

NAME: CARTER M REID TITLE: SECRETARY ADDRESS: 100 TREDEGAR STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: STEVEN A. ROGERS TITLE: SVP ADDRESS: 120 TREDEGAR STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: PAUL E. RUPPERT TITLE: SVP ADDRESS: 5000 DOMINION BOULEVARD CITY/ST/ZIP/CO: GLEN ALLEN, VA 23060	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: CORYNNE ARNETT TITLE: VICE PRESIDENT ADDRESS: 120 TREDEGAR STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JAMES R. CHAPMAN TITLE: ASST TREASURER ADDRESS: 100 TREDEGAR STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> 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/ KAREN W DOGGETT SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	KAREN W DOGGETT, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	5/20/2014 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.		