

1.) CORPORATION NAME: <b>Old Dominion Protection Plan Inc.</b> 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: <b>WILLIAM J ELLIOTT IV 1100 GREENVILLE AVE STAUNTON, VA</b> 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: <b>STAUNTON CITY</b> 4.) STATE OR COUNTRY OF INCORPORATION: <b>VA</b>	DUE DATE: <b>9/30/2016</b> SCC ID NO: <b>06993695</b> 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1
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6.) PRINCIPAL OFFICE ADDRESS:  ADDRESS: 1100 GREENVILLE AVE.  CITY/ST/ZIP: STAUNTON, VA 24401
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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: WILLIAM J ELLIOTT IV TITLE: PRESIDENT ADDRESS: 1100 GREENVILLE AVE. CITY/ST/ZIP/CO: STAUNTON, VA 24401	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR
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NAME: RYAN ELLIOTT TITLE: VICE PRESIDENT ADDRESS: 1100 GREENVRILLA AVE CITY/ST/ZIP/CO: STAUNTON, VA 24401	<input checked="" type="checkbox"/>	OFFICER <input type="checkbox"/> DIRECTOR
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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/ WILLIAM J ELLIOTT IV SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	WILLIAM J ELLIOTT IV, PRESIDENT PRINTED NAME AND CORPORATE TITLE	9/8/2016 DATE
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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.