

1.) CORPORATION NAME:

Dominion Voltage, Inc.

DUE DATE: **9/30/2011**

SCC ID NO: **07282668**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060-6802

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: STEVEN A ROGERS
TITLE: PRESIDENT
ADDRESS: 120 TREDEGAR ST
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: MARY C DOSWELL
TITLE: SVP
ADDRESS: 120 TREDEGAR STREET
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: G SCOTT HETZER
TITLE: SVP/TAX&TREASUR
ADDRESS: 100 TREDEGAR STREET
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: EDWARD H BAINE
TITLE: VICE PRESIDENT
ADDRESS: 100 TREDEGAR STREET
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: THOMAS R BEAN
TITLE: VICE PRESIDENT
ADDRESS: 120 TREDEGAR STREET
CITY/ST/ZIP/CO: RICHMOND, VA 23219-

OFFICER

DIRECTOR

NAME: JAMES P CARNEY TITLE: VP/ASST TREASUR ADDRESS: 100 TREDEGAR STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: CARTER M REID TITLE: VP/GENCOUNS/SEC ADDRESS: 100 TREDEGAR STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: DAVID G SHUFORD TITLE: VICE PRESIDENT ADDRESS: 120 TREDEGAR STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: ASHWINI SAWHNEY TITLE: CONTROLLER ADDRESS: 701 EAST CARY STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: E J MARKS, III TITLE: ASST SECRETARY ADDRESS: 100 TREDEGAR STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219-	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
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NAME: JOHN L NEWMAN TITLE: ASST TREASURER ADDRESS: 100 TREDEGAR STREET CITY/ST/ZIP/CO: RICHMOND, VA 23219-	<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/ E J MARKS, III	E J MARKS, III, ASST SECRETARY	9/1/2011
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.