

SCC eFile

2016 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

216506889

1.) CORPORATION NAME:

DEWBERRY & DAVIS, INC.

DUE DATE: **2/29/2016**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
Bank of America Center, 16th Floor
1111 East Main Street**

SCC ID NO: **F1284860**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 8401 ARLINGTON BOULEVARD

CITY/ST/ZIP: FAIRFAX, VA 22031

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:	DARREN R. CONNER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	551 PINEY FOREST ROAD		
CITY/ST/ZIP/CO:	DANVILLE, VA 24540		

NAME:	R. ALAN BURCHETTE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	ASST SEC		
ADDRESS:	551 PINEY FOREST ROAD		
CITY/ST/ZIP/CO:	DANVILLE, VA 24540		

NAME:	MARK H. REINER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	8401 ARLINGTON BOULEVARD		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22031		

NAME:	DONALD E. STONE, JR.	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	8401 ARLINGTON BOULEVARD		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22031		

NAME:	MARK F DAVIS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST. SECRETARY		
ADDRESS:	8401 ARLINGTON BOULEVARD		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22031		

NAME:	DAN M. PLEASANT	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	EVP		
ADDRESS:	8401 ARLINGTON BOULEVARD		
CITY/ST/ZIP/CO:	FAIRFAX, VA 22031		

NAME: CRAIG N. THOMAS TITLE: SECRETARY ADDRESS: 8401 ARLINGTON BOULEVARD CITY/ST/ZIP/CO: FAIRFAX, VA 22031	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: SIDNEY O. DEWBERRY TITLE: DIRECTOR ADDRESS: 8401 ARLINGTON BOULEVARD CITY/ST/ZIP/CO: FAIRFAX, VA 22031	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: BARRY DEWBERRY TITLE: DIRECTOR ADDRESS: 8401 ARLINGTON BOULEVARD CITY/ST/ZIP/CO: FAIRFAX, VA 22031	<input type="checkbox"/> OFFICER <input checked="" 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/ DONALD E. STONE, JR. SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	DONALD E. STONE, JR., EVP PRINTED NAME AND CORPORATE TITLE	2/24/2016 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.		