

1.) CORPORATION NAME:

Direct General Insurance Agency of Tennessee, Inc.
2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:
NATIONAL REGISTERED AGENTS INC
4701 COX ROAD
SUITE 301

GLEN ALLEN, VA

DUE DATE: **9/30/2013**

SCC ID NO: **F1599325**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

TN

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1281 MURFREESBORO ROAD
5-50

CITY/ST/ZIP: NASHVILLE, TN 37217

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:	JOHN MULLEN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CEO/PRES		
ADDRESS:	1281 MURFREESBORO RD		
CITY/ST/ZIP/CO:	NASHVILLE, TN 37217		

NAME:	CAROLYN NOLTE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	10225 FLORIDA BLVD		
CITY/ST/ZIP/CO:	BATON ROUGE, LA 70815		

NAME:	CONSTANCE A COLLINS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SEC		
ADDRESS:	1281 MURFREESBORO ROAD		
CITY/ST/ZIP/CO:	NASHVILLE, TN 37217		

NAME:	J TODD HAGLEY	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EVP/CFO/TREAS		
ADDRESS:	1281 MURFREESBORO RD		
CITY/ST/ZIP/CO:	NASHVILLE, TN 37217		

NAME:	JOHN ARENA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1281 MURFREESBORO PIKE		
CITY/ST/ZIP/CO:	NASHVILLE, TN 37217		

NAME:	AUSTIN BONN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SVP STORE SALES		
ADDRESS:	1281 MURFREESBORO RD		
CITY/ST/ZIP/CO:	NASHVILLE, TN 37217		

NAME: JOHN F CAMPBELL JR TITLE: EVP/COO ADDRESS: 1281 MURFREESBORO RD CITY/ST/ZIP/CO: NASHVILLE, TN 37217	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: WILLIAM M SMITH III TITLE: SVP HUMAN RESO ADDRESS: 1201 MURFREESBORO RD CITY/ST/ZIP/CO: NASHVILLE, TN 37217	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: JONATHAN DOWELL TITLE: ASST SECRETARY ADDRESS: 1281 MURFREESBORO RD CITY/ST/ZIP/CO: NASHVILLE, TN 37217	<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/ JONATHAN DOWELL SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JONATHAN DOWELL, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	8/5/2013 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.		