

1.) CORPORATION NAME:

DALLAS NATIONAL INSURANCE COMPANY

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 302
GLEN ALLEN, VA**

SCC ID NO: **F1799222**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	165,000
PREFER	100,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 5501 LBJ STE 1200

CITY/ST/ZIP: DALLAS, TX 75240

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 EDWARD REID	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5001 SPRING VALLEY ROAD		
CITY/ST/ZIP/CO:	DALLAS, TX 75244		

NAME:	H. Marc Carter	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	4670 I-49 North Service Road		
CITY/ST/ZIP/CO:	Opelousas, LA 70570		

NAME:	Andrew Peter Bustillo	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	41 Riverlawn Drive		
CITY/ST/ZIP/CO:	Fair Haven, NJ 07704		

NAME:	Eric Peter Serna	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	P.O. Box 8254		
CITY/ST/ZIP/CO:	Santa Fe, NM 87504		

NAME:	William B. Richardson	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	216 Washington Avenue		
CITY/ST/ZIP/CO:	Santa Fe, NM 87501		

NAME:	Mike Pickens	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	5501 LBJ Freeway Suite 1200		
CITY/ST/ZIP/CO:	Dallas, TX 75240		

NAME:	Glenn Weber	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	350 Madison Avenue		
CITY/ST/ZIP/CO:	21st Floor New York, NY 10017		

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/ H. MarcCarter	H. MarcCarter,	10/1/2013
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.