2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2008 8:00 am
Secretary of State
01-10-2008 90009 019 ***150.00

DOCUMENT # F97000001288

1. Entity Name
DIRECT GENERAL INSURANCE COMPANY

Principal Place of Business	Mailing Address
424 HAYNE AVENUE AIKEN, SC 29801	1281 MURFREESBORO RD NASHVILLE, TN 37217

01042008 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
10 West Market St.	
Suite, Apt. #, etc. 1050	Suite, Apt. #, etc.
City & State Indianapolis IN	City & State
Zip 46204 Country USA	Zip Country

4. FEI Number
62-1695059
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST. TALLAHASSEE, FL 32399-0000	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ADAIR, JACQUELINE C 1281 MURFREESBORO RD NASHVILLE, TN 37217	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President + Director James Dickson 1281 Murfreesboro Rd 37217	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFOD HAGELY, J. TODD 1281 MURFREESBORO RD NASHVILLE, TN 37217	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WILSON, RONALD F 1281 MURFREESBORO RD NASHVILLE, TN 37217	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director + Secretary Scott Boiczuk 1281 Murfreesboro Rd 37217	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPT HARMS, STEVEN R 1281 MURFREESBORO RD NASHVILLE, TN 37217	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	EVPD ADAIR, TAMMY R 1281 MURFREESBORO RD NASHVILLE, TN 37217	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Asst. Sec. Amy Sanford 1281 Murfreesboro Rd 37217	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS COLLINS, CONNIE A 1281 MURFREESBORO RD NASHVILLE, TN 37217	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Amy Sanford 1/7/8 (615-3606723
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #