

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000001288

Entity Name: DIRECT GENERAL INSURANCE COMPANY**Current Principal Place of Business:**8604 ALLISONVILLE ROAD
CASTLE CREEK 1, STE 130
INDIANAPOLIS, IN 46250**Current Mailing Address:**5630 UNIVERSITY PARKWAY
WINSTON-SALEM, NC 27105 US**FEI Number:** 62-1695059**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CHIEF FINANCIAL OFFICER
200 EAST GAINES STREET
TALLAHASSEE, FL 32399 US*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.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CAO
Name	BOLAR, DONALD
Address	5630 UNIVERSITY PARKWAY
City-State-Zip:	WINSTON SALEM NC 27105
Title	D
Name	THOMAS, GREGORY
Address	201 NORTH ILLINOIS STREET, 16TH FLOOR SOUT
City-State-Zip:	INDIANAPOLIS IN 46204
Title	DIRECTOR, CFO, TREASURER
Name	WEINER, MICHAEL
Address	59 MAIDEN LANE, 38TH FLOOR
City-State-Zip:	NEW YORK NY 10038
Title	DIRECTOR, COO
Name	RENDALL, PETER
Address	59 MAIDEN LANE, 38TH FLOOR
City-State-Zip:	NEW YORK NY 10038

Title	CCO
Name	HALL, GEORGE JR
Address	5630 UNIVERSITY PARKWAY
City-State-Zip:	WINSTON SALEM NC 27105
Title	DIRECTOR
Name	KARFUNKEL, BARRY
Address	59 MAIDEN LANE, 38TH FLOOR
City-State-Zip:	NEW YORK NY 10038
Title	DIRECTOR, GENERAL COUNSEL AND SECRETARY
Name	WEISSMANN, JEFFREY
Address	59 MAIDEN LANE, 38TH FLOOR
City-State-Zip:	NEW YORK NY 10038
Title	PRESIDENT
Name	KARFUNKEL, ROBERT
Address	59 MAIDEN LANE, 38TH FLOOR
City-State-Zip:	NEW YORK NY 10038

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL GOLDSTEIN

SVP, TAX

06/15/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	SVP. TAX
Name	GOLDSTEIN, MICHAEL
Address	59 MAIDEN LANE, 38TH FL
City-State-Zip:	NEW YORK NY 10038