

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005951

Entity Name: PLACER INSURANCE AGENCY, INC.

Current Principal Place of Business:

5 SIERRA GATE PLAZA
2ND FLOOR
ROSEVILLE, CA 95678

Current Mailing Address:

5 SIERRA GATE PLAZA
2ND FLOOR
ROSEVILLE, CA 95678 US

FEI Number: 39-1907217

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 VICE PRESIDENT, TREASURER
Name CROSSER, WENDELL P.
Address 5 SIERRA GATE PLAZA
2ND FLOOR
City-State-Zip: ROSEVILLE CA 95678

Title DIRECTOR
Name MESSELHEISER, BRENT P.
Address 5 SIERRA GATE PLAZA
2ND FLOOR
City-State-Zip: ROSEVILLE CA 95678

Title DIRECTOR
Name LEACH, MICHAEL P.
Address 5 SIERRA GATE PLAZA
2ND FLOOR
City-State-Zip: ROSEVILLE CA 95678

Title VICE PRESIDENT, SECRETARY
Name HORNER, ROBERT W. III
Address 5 SIERRA GATE PLAZA
2ND FLOOR
City-State-Zip: ROSEVILLE CA 95678

Title PRESIDENT, DIRECTOR
Name GUTIERREZ, MELISSA D.
Address 5 SIERRA GATE PLAZA
2ND FLOOR
City-State-Zip: ROSEVILLE CA 95678

Title DIRECTOR
Name SHORE, AMY T.
Address 5 SIERRA GATE PLAZA
2ND FLOOR
City-State-Zip: ROSEVILLE CA 95678

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: ROBERT W. HORNER, III

SECRETARY

04/27/2018

Electronic Signature of Signing Officer/Director Detail

Date