

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000002385

**Entity Name:** INDEPENDENT PROTECTION COMPANY INC

**Current Principal Place of Business:**

67819 S.R. 15  
NEW PARIS, IN 46553

**Current Mailing Address:**

67819 S.R. 15  
NEW PARIS, IN 46553

**FEI Number: 35-0406700**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 P  
Name CRIPE, ROBERT E  
Address 67819 S.R. 15  
City-State-Zip: NEW PARIS IN 46553

Title VP  
Name CRIPE, RICHARD D  
Address 67819 S.R. 15  
City-State-Zip: NEW PARIS IN 46553

Title S  
Name CRIPE, BETTY J  
Address 67819 S.R. 15  
City-State-Zip: NEW PARIS IN 46553

Title C  
Name CRAIG, THOMAS  
Address 67819 S.R. 15  
City-State-Zip: NEW PARIS IN 46553

*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: THOMAS CRAIG**

**CONTROLLER**

**01/11/2021**

Electronic Signature of Signing Officer/Director Detail

Date