

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000002904

**Entity Name:** TITAN AUTO INSURANCE OF NEW MEXICO, INC.**Current Principal Place of Business:**8877 NORTH GAINEY CENTER DRIVE  
SCOTTSDALE, AZ 85258**Current Mailing Address:**8877 NORTH GAINEY CENTER DRIVE  
SCOTTSDALE, AZ 85258 US**FEI Number:** 74-2825853**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 DIRECTOR  
Name RIDDLE, MENDI H.  
Address 8877 NORTH GAINEY CENTER DRIVE  
City-State-Zip: SCOTTSDALE AZ 85258

Title PRESIDENT, CHIEF OPERATING OFFICER  
Name BERVEN, MARK A.  
Address 8877 NORTH GAINEY CENTER DRIVE  
City-State-Zip: SCOTTSDALE AZ 85258

Title SECRETARY  
Name SKINGLE, DENISE L.  
Address 8877 NORTH GAINEY CENTER DRIVE  
City-State-Zip: SCOTTSDALE AZ 85258

Title DIRECTOR  
Name LEACH, MICHAEL P.  
Address 8877 NORTH GAINEY CENTER DRIVE  
City-State-Zip: SCOTTSDALE AZ 85258

Title TREASURER  
Name BUEHLER, ROBERT A.  
Address 8877 NORTH GAINEY CENTER DRIVE  
City-State-Zip: SCOTTSDALE AZ 85258

*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:** DENISE L. SKINGLE**SECRETARY****05/01/2020**

Electronic Signature of Signing Officer/Director Detail

Date