

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000004612

**Entity Name:** NORTHSTAR RISK MANAGEMENT & INSURANCE SERVICES, INC.

**FILED**  
**Apr 21, 2021**  
**Secretary of State**  
**2336045875CC**

**Current Principal Place of Business:**

2890 NORTH MAINT ST  
SUITE 302  
WALNUT CREEK, CA 94597

**Current Mailing Address:**

2890 NORTH MAINT ST  
SUITE 302  
WALNUT CREEK, CA 94597 US

**FEI Number: 68-0307094**

**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           TREASURER, DIRECTOR,  
                  SECRETARY, CEO  
Name           BATES, CHARLES W.  
Address        149 CAPERTON AVENUE  
City-State-Zip:   PIEDMONT CA 94611

Title           PRESIDENT  
Name           THORNDIKE, CHRISTOPHER  
Address        2890 NORTH MAINT ST  
                  SUITE 302  
City-State-Zip:   WALNUT CREEK CA 94597

*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: CHARLES W. BATES**

**CHIEF EXECUTIVE  
OFFICER**

**04/21/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date