

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000000829

**Entity Name:** HEARTLAND CROP INSURANCE, INC.

**Current Principal Place of Business:**

1127 HIGHWAY 190 EAST SERVICE ROAD  
COVINGTON, LA 70433

**Current Mailing Address:**

1127 HIGHWAY 190 EAST SERVICE ROAD  
COVINGTON, LA 70433 US

**FEI Number: 48-1227624**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 TD  
Name PEMBERTON, RICHARD S  
Address 1127 HIGHWAY 190 EAST SERVICE ROAD  
City-State-Zip: COVINGTON LA 70433

Title P  
Name MIILLER, RON  
Address 1608 A WEST LAFAYETTE AVE.  
City-State-Zip: JACKSONVILLE IL 62650

Title VPO  
Name LEIGHTON, BRAD  
Address 1608 A WEST LAFAYETTE AVE.  
City-State-Zip: JACKSONVILLE IL 62650

Title VPA  
Name SINGLETON, ALAN N.  
Address 2209 RIVER ROAD  
City-State-Zip: LOUISVILLE KY 40206

Title S  
Name UTTER, ELLIE  
Address 1608 A WEST LAFAYETTE AVE.  
City-State-Zip: JACKSONVILLE IL 62650

*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: ELLIE UTTER**

**SECRETARY**

**04/21/2021**

Electronic Signature of Signing Officer/Director Detail

Date