# 2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# F08000003800

Entity Name: KNIGHTBROOK INSURANCE COMPANY

### **Current Principal Place of Business:**

1807 NORTH MARKET STREET BRANDYWINE VILLAGE WILMINGTON, DE 19802-4810

# **Current Mailing Address:**

4751 WILSHIRE BLVD STE 111 LOS ANGELES, CA 90010 US

### FEI Number: 51-0098159

### Name and Address of Current Registered Agent:

REGISTERED AGENT SOLUTIONS, INC. 155 OFFICE PLAZA DR., SUITE A 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

### **Officer/Director Detail :**

Title	CHAIRMAN, DIRECTOR, CEO	Title	PRESIDENT, DIRECTOR	
Name	HANKEY, DON R	Name	SHAH, AMIT B	
Address	4751 WILSHIRE BLVD STE 111	Address	4751 WILSHIRE BLVD STE 111	
City-State-Zip:	LOS ANGELES CA 90010	City-State-Zip:	LOS ANGELES CA 90010	
Title	ASST. SECRETARY, DIRECTOR	Title	SECRETARY, DIRECTOR	
Name	HANKEY, BRET C	Name	RYGH, JOHN M	
Address	4751 WILSHIRE BLVD STE 111	Address	4751 WILSHIRE BLVD STE 111	
City-State-Zip:	LOS ANGELES CA 90010	City-State-Zip:	LOS ANGELES CA 90010	
Title	DIRECTOR	Title	CFO & GENERAL COUNSEL	
Name	ANG, GRACIA	Name	LEUNG, JACKIE	
Address	4751 WILSHIRE BLVD STE 111	Address	4751 WILSHIRE BLVD SUITE 111	
City-State-Zip:	LOS ANGELES CA 90010	City-State-Zip:	LOS ANGELES CA 90010	

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: AMIT SHAH

PRESIDENT

03/16/2021

Date

# FILED Mar 16, 2021 Secretary of State 3473328644CC

Certificate of Status Desired: No

Date

Electronic Signature of Signing Officer/Director Detail