

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F19000004028

Entity Name: TIBURON INSURANCE SERVICES, INC.

Current Principal Place of Business:

6800 W. 115TH STREET
SUITE:2511
OVERLAND PARK, KS 66211-2205

Current Mailing Address:

6800 W. 115TH STREET
SUITE:2511
OVERLAND PARK, KS 66211-2205 US

FEI Number: 11-3788055

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYES 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 CEO, DIRECTOR
Name DANKER, TIMOTHY
Address 6800 W. 115TH STREET, SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title CFO
Name SADUN, RAFFAELE
Address 6800 W. 115TH STREET, SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name HAWKS, DONALD L III
Address 6800 W. 115TH STREET, SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title SECRETARY
Name BOULWARE, DANIEL (AL)
Address 6800 W. 115TH STREET
SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name GRANT, WILLIAM (TOM) II
Address 6800 W. 115TH STREET
SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name DEVINE, DENISE
Address 6800 W. 115TH STREET
SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name PATEL, KAVITA
Address 6800 W. 115TH STREET
SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title DIRECTOR
Name WELDON, RAYMOND F.
Address 6800 W. 115TH STREET
SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205

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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: RHYS T, SHEPARD

AUTHORIZED PERSON

05/01/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DEVANNY, EARL H. III
Address 6800 W. 115TH STREET
SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title PRESIDENT
Name GRANT, ROBERT (BOB) CLAY
Address 6800 W. 115TH STREET
SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205

Title AUTHORIZED PERSON
Name SHEPARD, RHYS T.
Address 6800 W. 115TH STREET
SUITE:2511
City-State-Zip: OVERLAND PARK KS 66211-2205