

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05604

Entity Name: 21ST CENTURY INSURANCE AND FINANCIAL SERVICES, INC.**Current Principal Place of Business:**3 BEAVER VALLEY RD
WILMINGTON, DE 19803**Current Mailing Address:**3 BEAVER VALLEY RD
WILMINGTON, DE 19803 US**FEI Number:** 51-0283170**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 PRESIDENT
Name BIDLINGMAIER, KRIS M
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title S
Name POPP, MAURA C
Address 3 BEAVER VALLEY RD
City-State-Zip: WILMINGTON DE 19803

Title TREASURER
Name HARM, THERESA L
Address 3 BEAVER VALLEY RD
City-State-Zip: WILMINGTON DE 19803

Title VP
Name BAUR, MAITE I
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title VP, ASST. TREASURER
Name NOH, THOMAS S
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title AT
Name GRETCHEN, BARNES L
Address 5600 BEECH TREE LANE
City-State-Zip: CALEDONIA MI 49316

Title DIRECTOR
Name JACKSON, GAIL N
Address 7763 VERAGUA DR
City-State-Zip: PLAYA DEL REY CA 90293

Title DIRECTOR
Name HANSON, GUY M
Address 7655 HIGHWAY 10
City-State-Zip: MISSOULA MT 59808

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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: GRETCHEN L BARNES**ASST. TREASURER****04/28/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	LEWIS, SHERMAN L III
Address	2404 GALLEION POINT CT
City-State-Zip:	PEARLAND TX 77584