### 2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05604

Entity Name: 21ST CENTURY INSURANCE AND FINANCIAL SERVICES, INC.

FILED
Jan 22, 2013
Secretary of State
CC4520916415

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

3 BEAVER VALLEY RD WILMINGTON. DE 19803

### **Current Mailing Address:**

PO BOX 2450

GRAND RAPIDS. MI 49501-2450

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 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	DP	Title	Т

NameDESANTIS, ANTHONY JNamePFEIL, GLENN AAddress3 BEAVER VALLEY RDAddress3 BEAVER VALLEY RDCity-State-Zip:WILMINGTON DE 19803City-State-Zip:WILMINGTON DE 19803

Title VP Title VPD

NameLOUCKS, WILLIAM DNameMYHAN, RONALD GAddress3 BEAVER VALLEY RDAddress4680 WILSHIRE BLVDCity-State-Zip:WILMINGTON DE 19803City-State-Zip:LOS ANGELES CA 90010

Title S Title AT

Name HOHL, DOREN E Name PEPPER, JEFFREY L

Address 4680 WILSHIRE BLVD Address 5600 BEECH TREE LANE

City-State-Zip: LOS ANGELES CA 90010 City-State-Zip: CALEDONIA MI 49316

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Title DIRECTOR Title DIRECTOR

NameMARLIN, DALE ANameRODRIGUEZ, DONALD EAddress1575 CAPADARO CTAddress3635 LONG BEACH BLVDCity-State-Zip:MONUMENT CO 80132City-State-Zip:LONG BEACH CA 90807

# Continues on page 2

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: JEFFREY L PEPPER

**ASST TREASURER** 

01/22/2013

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name WUO, JOHN E

Address 75 N SANTA ANITA SUITE 106

City-State-Zip: ARCADIA CA 91006

Title DIRECTOR

Address

Name KAPLAN, PETER D

City-State-Zip: LOS ANGELES CA 90069

8711 ST IVES DR

Title DIRECTOR

Name BENTLEY, KENNETH W

Address 800 N BRAND BLVD

City-State-Zip: GLENDALE CA 90069