### 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05604

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

FILED
Jan 15, 2016
Secretary of State
CC9239143049

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

3 BEAVER VALLEY RD WILMINGTON, DE 19803

## **Current Mailing Address:**

PO BOX 2450 TAX DEPT

GRAND RAPIDS. MI 49501-2450 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 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, DIRECTOR	Title	VP, ASST. TREASURER
Name	PFEIL, GLENN A	Name	MYHAN, RONALD G
Address	3 BEAVER VALLEY RD	Address	4750 WILSHIRE BLVD
City-State-Zip:	WILMINGTON DE 19803	City-State-Zip:	LOS ANGELES CA 90010

Title S Title AT

NamePOPP, MAURA CNamePEPPER, JEFFREY LAddress3 BEAVER VALLEY RDAddress5600 BEECH TREE LANECity-State-Zip:WILMINGTON DE 19803City-State-Zip:CALEDONIA MI 49316

Title VP Title VP, DIRECTOR

NameBOYD, MICHAEL ANameKELLY, SHANNON LAddress5600 BEECH TREE LANEAddress3 BEAVER VALLEY RDCity-State-Zip:CALEDONIA MI 49316City-State-Zip:WILMINGTON DE 19803

Title VP Title VP

NameMCLARNON, REGINA MNameWILLIAMS, KARYN LAddress3 BEAVER VALLEY RDAddress4680 WILSHIRE BLVDCity-State-Zip:WILMINGTON DE 19803City-State-Zip:LOS ANGELES CA 90010

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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: JEFFREY L PEPPER

ASST TREASURER

01/15/2016

# Officer/Director Detail Continued:

Title TREASURER

Name SATO, KIM M

Address SIX WATERFRONT PLAZA

500 ALA MOANA BLVD

City-State-Zip: HONOLULU HI 96813

Title DIRECTOR

Name DALY, KEITH G

Address 31051 AGOURA RD

City-State-Zip: WESTLAKE VILLAGE CA 91361

Title DIRECTOR

Name BENTLEY, KENNETH W

Address 6642 SHENANDOAH AVE

City-State-Zip: LOS ANGELES CA 90056

Title DIRECTOR

Name JACKSON, GAIL N

Address 7763 VERAGUA DR

City-State-Zip: PLAYA DEL REY CA 90293