

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P16717

Entity Name: WESTERN STATES FIRE PROTECTION COMPANY

Current Principal Place of Business:

7020 S. TUCSON WAY
CENTENNIAL, CO 80112

Current Mailing Address:

1100 OLD HIGHWAY 8 NW
NEW BRIGHTON, MN 55112 US

FEI Number: 84-0973303

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 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 CHIEF EXECUTIVE OFFICER AND PRESIDENT
Name DEPRIEST, JOSEPH
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title DIRECTOR
Name LYDON, THOMAS A.
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title SECRETARY
Name LYDON, THOMAS A.
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title DIRECTOR
Name BECKER, RUSSELL A.
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title TREASURER
Name LYDON, THOMAS A.
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title CFO
Name LYDON, THOMAS A.
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title ASSISTANT TREASURER
Name COPE, LUCAS
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title ASSISTANT SECRETARY
Name COPE, LUCAS
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

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: SCOTT HATFIELD

ASSISTANT TREASURER 04/19/2021

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title ASSISTANT TREASURER
Name POLOVITZ, MARK
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title ASSISTANT TREASURER
Name HATFIELD, SCOTT
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title ASSISTANT SECRETARY
Name ROHNE, ZACHARY
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title EXECUTIVE VICE PRESIDENT
Name CHARLES, III, JUNE R.
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112

Title ASSISTANT TREASURER
Name ROHNE, ZACHARY
Address 7020 S. TUCSON WAY
City-State-Zip: CENTENNIAL CO 80112