

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000074275

Entity Name: BRISTOL WEST INSURANCE SERVICES, INC. OF FLORIDA

FILED
Mar 24, 2022
Secretary of State
6936344716CC

Current Principal Place of Business:

1300 CONCORD TERRACE,
SUITE #120
SUNRISE, FL 33323

Current Mailing Address:

TAX DEPARTEMNT
PO BOX 2450
GRAND RAPIDS, MI 49501 US

FEI Number: 65-0616769

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, DIRECTOR
Name KOOPMAN, BRONWYN E
Address ROCKSIDE CENTER III
 5990 W CREEK RD
City-State-Zip: INDEPENDENCE OH 44131

Title VP, TREASURER
Name AGUILERA, MARIA E
Address 1300 CONCORD TERRACE
 STE 120
City-State-Zip: SUNRISE FL 33323

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

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

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

Title DIRECTOR
Name BROWN, THOMAS D
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR
Name MYHAN, RONALD G
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367

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

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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

ASSISTANT TREASURER 03/24/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. TREASURER
Name TOMICH, ANTHONY W
Address 6301 OWENSMOUTH AVE
City-State-Zip: WOODLAND HILLS CA 91367