

**2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000004875

**FILED**  
**Feb 12, 2019**  
**Secretary of State**  
**2132397574CC**

**Entity Name:** INTERWEST INSURANCE SERVICES, LLC

**Current Principal Place of Business:**

8950 CAL CENTER DR  
SUITE 200  
SACRAMENTO, CA 95826

**Current Mailing Address:**

P.O. BOX 255188  
SACRAMENTO, CA 95865-5188 US

**FEI Number:** 68-0266090

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BUSINESS FILINGS INCORPORATED  
515 E PARK AVE  
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

**Authorized Person(s) Detail :**

Title AMBR  
Name ZIESKE, CARI MARIE  
Address 8950 CAL CENTER DR  
STE 200  
City-State-Zip: SACRAMENTO CA 95826

Title AMBR  
Name BULOTTI, JAMES ALLEN JR.  
Address 8950 CAL CENTER DR., STE 200  
City-State-Zip: SACRAMENTO CA 95826

Title AMBR  
Name ARENCHILD, MERVIN EARL III  
Address 1357 E. LASSEN AVE., SUITE 100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name BAUER, MATTHEW EVAN  
Address 1357 E. LASSEN AVE., SUITE 100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name SCHULER, KEITH  
Address 1357 E. LASSEN AVE., SUITE 100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name BLOFSKY, MARK E  
Address 1357 E. LASSEN AVE., #100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name BROWN, DENISE  
Address 1357 E LASSEN AVE, #100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name CARMASSI, STEPHEN  
Address 8950 CAL CENTER DR., STE 200  
City-State-Zip: SACRAMENTO CA 95826

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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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KEITH SCHULER

**AUTHORIZED MEMBER**

**02/12/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title AMBR  
Name HARRISON, RICHARD  
Address 222 COURT ST  
City-State-Zip: WOODLAND CA 95695

Title AMBR  
Name HOPKINS, JOHN  
Address 1357 E LASSEN AVE  
100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name HUGHES, THOMAS  
Address 1357 E LASSEN AVE  
100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name POLLARD, DONALD  
Address 1357 E LASSEN AVE  
100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name REVELES, MARIO  
Address 8950 CAL CENTER DR., STE 200  
City-State-Zip: SACRAMENTO CA 95826

Title AMBR  
Name THOMAS, BRUCE  
Address 1357 E LASSEN AVE  
100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name WEATHERSBEE, JENNIFER  
Address 8950 CAL CENTER DR., STE 200  
City-State-Zip: SACRAMENTO CA 95826

Title AMBR  
Name YATES, GARRETT  
Address 222 COURT ST  
City-State-Zip: WOODLAND CA 95695

Title AUTHORIZED MEMBER  
Name CARTER, MICHELE  
Address 1357 E. LASSEN AVE  
City-State-Zip: CHICO CA 95973

Title AUTHORIZED MEMBER  
Name MUSKOPF, BRANDON  
Address 8950 CAL CENTER DR  
SUITE 200  
City-State-Zip: SACRAMENTO CA 95826

Title AMBR  
Name HOFFMAN, PATRICK  
Address 1357 E. LASSEN AVE  
100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name HOUCK, CRAIG  
Address 8950 CAL CENTER DR., STE 200  
City-State-Zip: SACRAMENTO CA 95826

Title AMBR  
Name KREPELKA, ROSE  
Address 1357 E LASSEN AVE  
100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name POZAS, ANTHONY  
Address 1357 E LASSEN AVE  
100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name SEAMANS, BRIAN  
Address 1357 E LASSEN AVE  
100  
City-State-Zip: CHICO CA 95973

Title AMBR  
Name WATKINS, PHILLIP  
Address 310 HEMSTED AVE  
200  
City-State-Zip: REDDING CA 96002

Title AMBR  
Name WILLIAMS, STEVEN  
Address 310 HEMSTED AVE  
200  
City-State-Zip: REDDING CA 96002

Title AUTHORIZED MEMBER  
Name IWINS HOLDINGS, LLC  
Address 8950 CAL CENTER DR., STE 200  
City-State-Zip: SACRAMENTO CA 95826

Title AUTHORIZED MEMBER  
Name CLAUSER, GREGORY  
Address 8950 CAL CENTER DR  
SUITE 200  
City-State-Zip: SACRAMENTO CA 95826

Title AUTHORIZED MEMBER  
Name SCHOONHOVEN, KEVIN  
Address 100 PRINGLE AVE #550  
City-State-Zip: WALNUT CREEK CA 94596

Title AUTHORIZED MEMBER  
Name SCOVILLE, GREGORY  
Address 8950 CAL CENTER DR  
SUITE 200  
City-State-Zip: SACRAMENTO CA 95826

Title AUTHORIZED MEMBER  
Name RYAN, MIKE  
Address 8950 CAL CENTER DR  
SUITE 200  
City-State-Zip: SACRAMENTO CA 95826