

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000000045

Entity Name: SBS OF CALIFORNIA INSURANCE AGENCY, INC.**Current Principal Place of Business:**2301 ROSECRANS AVE
STE 5100
EL SEGUNDO, CA 90245**Current Mailing Address:**2301 ROSECRANS AVE
STE 5100
EL SEGUNDO, CA 90245 US**FEI Number:** 52-2305203**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 TAYLOR, THOMAS
Address 2301 ROSECRANS AVE
STE 5100
City-State-Zip: EL SEGUNDO CA 90245

Title TREASURER
Name SHORES, KEITH
Address 2301 ROSECRANS AVE
STE 5100
City-State-Zip: EL SEGUNDO CA 90245

Title SECRETARY
Name GOK, LISA
Address 2301 ROSECRANS AVE
STE 5100
City-State-Zip: EL SEGUNDO CA 90245

Title DIRECTOR
Name GOOLEY, THOMAS
Address 2301 ROSECRANS AVE
STE 5100
City-State-Zip: EL SEGUNDO CA 90245

Title OFFICER
Name CHAFFIN, GARY
Address 2301 ROSECRANS AVE
STE 5100
City-State-Zip: EL SEGUNDO CA 90245

Title DIRECTOR, VP
Name SMILEY, STANLEY
Address 2301 ROSECRANS AVE
STE 5100
City-State-Zip: EL SEGUNDO CA 90245

Title VP
Name JOSEPH, NEARY
Address 2301 ROSECRANS AVE
STE 5100
City-State-Zip: EL SEGUNDO CA 90245

Title ASST. SECRETARY
Name DAVID, VAN HAVERMAAT
Address 2301 ROSECRANS AVE
STE 5100
City-State-Zip: EL SEGUNDO CA 90245

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: GARY CHAFFIN**TAX OFFICER****03/29/2023**

Electronic Signature of Signing Officer/Director Detail

Date