2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15310

Entity Name: 21ST CENTURY PREFERRED INSURANCE COMPANY

FILED
Apr 18, 2019
Secretary of State
1823967056CC

Current Principal Place of Business:

3 BEAVER VALLEY ROAD WILMINGTON, DE 19803

Current Mailing Address:

PO BOX 2450

GRAND RAPIDS. MI 49501-2450

FEI Number: 95-2743473 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES ST. TALLAHASSEE, FL 32399 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 S	Title	VP, AT
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NameHOHL, DOREN ENameMYHAN, RONALD GAddress6301 OWENSMOUTH AVEAddress6301 OWENSMOUTH AVECity-State-Zip:WOODLAND HILLS CA 91367City-State-Zip:WOODLAND HILLS CA 91367

Title PRESIDENT, DIRECTOR Title AT

NameLOUCKS, WILLIAM D JR.NamePEPPER, JEFFREY LAddress3 BEAVER VALLEY ROADAddress5600 BEECH TREE LANECity-State-Zip:WILMINGTON DE 19803City-State-Zip:CALEDONIA MI 49316

Title VP Title DIRECTOR

Name MCCARTHY, VICTORIA L Name JACKSON, GAIL N
Address 6301 OWENSMOUTH AVE Address 7763 VERAGUA DR

City-State-Zip: WOODLAND HILLS CA 91367 City-State-Zip: PLAYA DEL REY CA 90293

Title TREASURER, DIRECTOR Title VP

Name HARM, THERESA L Name BAUR, MAITE I

Address 3 BEAVER VALLEY RD Address 6301 OWENSMOUTH AVE

City-State-Zip: WILMINGTON DE 19803 City-State-Zip: WOODLAND HILLS CA 91367

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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

Electronic Signature of Signing Officer/Director Detail

ASST TREASURER

04/18/2019

Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

NameHANSON, GUY MNameLEWIS, SHERMAN L IIIAddress7655 HIGHWAY 10Address2404 GALLEON POINT CTCity-State-Zip:MISSOULA MT 59808City-State-Zip:PEARLAND TX 77584

Title DIRECTOR Title DIRECTOR

NameMARLIN, DALE ANameMURRAY, TIMOTHY JAddress1575 CAPADARO CTAddress6301 OWENSMOUTH AVECity-State-Zip:MONUMENT CO 63730City-State-Zip:WOODLAND HILLS CA 91367