

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 846846

**Entity Name:** 21ST CENTURY NORTH AMERICA INSURANCE COMPANY

**Current Principal Place of Business:**

200 GARDEN CITY PLAZA  
SUITE 400  
GARDEN CITY, NY 11530

**FILED**  
**Mar 23, 2022**  
**Secretary of State**  
**3655203619CC**

**Current Mailing Address:**

PO BOX 2450  
GRAND RAPIDS, MI 49501-2450 US

**FEI Number: 13-3333609**

**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  
Name HOHL, DOREN E  
Address 6301 OWENSMOUTH AVE  
City-State-Zip: WOODLAND HILLS CA 91367

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

Title AT  
Name BARNES, GRETCHEN L  
Address 5600 BEECH TREE LANE  
City-State-Zip: CALEDONIA MI 49504-2450

Title DIRECTOR  
Name ROTHENBERG, BRYAN M  
Address 6301 OWENSMOUTH AVE  
City-State-Zip: WOODLAND HILLS CA 91367

Title VP  
Name MCCARTHY, VICTORIA L  
Address 6301 OWENSMOUTH AVE  
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR  
Name JACKSON, GAIL N  
Address 6301 OWENSMOUTH AVE  
City-State-Zip: WOODLAND HILLS CA 91367

Title TREASURER, DIRECTOR  
Name HARM, THERESA L  
Address 3 BEAVER VALLEY RD  
City-State-Zip: WILMINGTON DE 19803

Title VP  
Name BAUR, MAITE I  
Address 6301 OWENSMOUTH AVE  
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: GRETCHEN L. BARNES**

**ASSIST TREASURER**

**03/23/2022**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name HANSON, GUY M  
Address 6301 OWENSMOUTH AVE  
City-State-Zip: WOODLAND HILLS CA 91367

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

Title PRESIDENT, DIRECTOR  
Name BIDLINGMAIER, KRIS M  
Address 6301 OWENSMOUTH AVE  
City-State-Zip: WOODLAND HILLS CA 91367

Title DIRECTOR  
Name LEWIS, SHERMAN L III  
Address 6301 OWENSMOUTH AVE  
City-State-Zip: WOODLAND HILLS CA 91367

Title VP  
Name ROBERT, HOWARD P  
Address 6301 OWENSMOUTH AVE  
City-State-Zip: WOODLAND HILLS CA 91367

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