# 2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0800000994

Entity Name: CAPITAL PREMIUM FINANCING, INC.

#### **Current Principal Place of Business:**

12235 SOUTH 800 EAST DRAPER, UT 84020

## **Current Mailing Address:**

12235 SOUTH 800 EAST DRAPER, UT 84020 US

#### FEI Number: 82-0423224

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

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

## **Officer/Director Detail :**

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Title	VICE CHAIR	Title	PRESIDENT
Name	CROWLEY, SCOTT L.	Name	HEUGLY, JOSEF C.
Address	12235 SOUTH 800 EAST	Address	12235 SOUTH 800 EAST
City-State-Zip:	DRAPER UT 84020	City-State-Zip:	DRAPER UT 84020
Title	DIRECTOR	Title	CONTROLLER, VP FINANCE
Name	HEUGLY, JOSEF C.	Name	CHIDESTER, CHRISTIAN E.
Address	12235 SOUTH 800 EAST	Address	12235 SOUTH 800 EAST
City-State-Zip:	DRAPER UT 84020	City-State-Zip:	DRAPER UT 84020
Title	VP OF MARKETING	Title	DIRECTOR
Name	LIBUTTI, MATTHEW J.	Name	NIELSEN, STEVEN J.
Address	12235 SOUTH 800 EAST	Address	12235 SOUTH 800 EAST
City-State-Zip:	DRAPER UT 84020	City-State-Zip:	DRAPER UT 84020
Title	CEO	Title	SECRETARY
Name	GABRIELSEN, DAVID F.	Name	GABRIELSEN, LORIANN C.
Address	12235 SOUTH 800 EAST	Address	12235 SOUTH 800 EAST
City-State-Zip:	DRAPER UT 84020	City-State-Zip:	DRAPER UT 84020

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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: CROWLEY, SCOTT L.

VICE CHAIR

03/31/2022

Electronic Signature of Signing Officer/Director Detail

FILED Mar 31, 2022 Secretary of State 5139930183CC

Certificate of Status Desired: No

Date

# **Officer/Director Detail Continued :**

Title	TREASURER	Title	C00
Name	CROWLEY, SCOTT L.	Name	HEUGLY, JOSEF C.
Address	12235 SOUTH 800 EAST	Address	12235 SOUTH 800 EAST
City-State-Zip:	DRAPER UT 84020	City-State-Zip:	DRAPER UT 84020
Title	DIRECTOR	Title	CHAIRMAN OF THE BOARD
Name	HEUGLY, MARK H.	Name	GABRIELSEN, DAVID F.
Address	12235 SOUTH 800 EAST	Address	12235 SOUTH 800 EAST
City-State-Zip:	DRAPER UT 84020	City-State-Zip:	DRAPER UT 84020
Title	DIRECTOR	Title	DIRECTOR
Name	TIMOTHY, CRAIG J.	Name	GABRIELSEN, LORIANN C.
Address	12235 SOUTH 800 EAST	Address	12235 SOUTH 800 EAST
City-State-Zip:	DRAPER UT 84020	City-State-Zip:	DRAPER UT 84020
Title	DIRECTOR		

Address 12235 SOUTH 800 EAST City-State-Zip: DRAPER UT 84020

CHIDESTER, CHRISTIAN E.

Name