

STATE OF CALIFORNIA

CORPORATION

Office of the Secretary of State

STATEMENT OF INFORMATION

BA20250283075

For Office Use Only



File No.: BA20250283075

CLIFORT A	California Secretary of State 1500 11th Street Sacramento, California 95814 (916) 657-5448						File No.: BA20250283075 Date Filed: 2/7/2025	
Entity Details Corporation Name					Barney Storms Insurance Agency, Inc.			
Entity No.					6573888			
Formed In					CALIFORNIA			
Street Address of Princ	ipal Offic	e of Corpo	pration					
Principal Address					4800 STOCKDALE HIGHWAY SUITE 414 BAKERSFIELD, CA 93309			
Mailing Address of Corp	ooration							
Mailing Address				SU	4800 STOCKDALE HIGHWAY SUITE 414 BAKERSFIELD, CA 93309			
Attention								
Street Address of California Office of Corporation Street Address of California Office				4800 STOCKDALE HIGHWAY SUITE 414 BAKERSFIELD, CA 93309				
Officers								
Officer Name	Officer Name Officer Address			Position(s)				
SUITE 414			OCKDALE HIGHWAY 14 SFIELD, CA 93309	Chief Executive Officer, Chief Financial Officer, Secretary				
Additional Officers								
Officer Name			Officer Address		Position		Stated Position	
			Non	e Enter	ed			
Directors Director Name					Director Address			
				400				
+ Barney Storms				SUI	4800 STOCKDALE HIGHWAY SUITE 414 BAKERSFIELD, CA 93309			
The number of va	acancie	es on Bo	ard of Directors is: 0					
Agent for Service of Pro	ocess							
Agent Name					Barney Storms			
Agent Address				SU	4800 STOCKDALE HIGHWAY SUITE 414 BAKERSFIELD, CA 93309			
Type of Business								
Type of Business				Insu	Insurance Services			
Email Notifications	r				=			
Opt-in Email Notifications					No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.			

Labor Judgment

No Officer or Director of this Corporation has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal therefrom is pending, for the violation of any wage order or provision of the Labor Code.

Electronic Signature

By signing, I affirm that the information herein is true and correct and that I am authorized by California law to sign.

Signature

02/07/2025

Date