

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F93000001634

**Entity Name:** TOYOTA MOTOR INSURANCE SERVICES, INC.**Current Principal Place of Business:**6565 HEADQUARTERS DRIVE  
W2-5A  
PLANO, TX 75024**Current Mailing Address:**6565 HEADQUARTERS DRIVE  
W2-5A  
PLANO, TX 75024 US**FEI Number:** 33-0178825**Certificate of Status Desired:** No**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

Date

**Officer/Director Detail :**

Title	CFO
Name	COOKE, SCOTT
Address	6565 HEADQUARTERS DRIVE W2-5A
City-State-Zip:	PLANO TX 75024

Title	SECRETARY
Name	FARRELL, ELLEN L
Address	6565 HEADQUARTERS DRIVE W2-5A
City-State-Zip:	PLANO TX 75024

Title	DIRECTOR
Name	HAGEY, ALEC
Address	6565 HEADQUARTERS DRIVE W2-5A
City-State-Zip:	PLANO TX 75024

Title	DIRECTOR
Name	SAKA, MAO
Address	6565 HEADQUARTERS DRIVE W2-5A
City-State-Zip:	PLANO TX 75024

Title	DIRECTOR, CEO, PRESIDENT
Name	TEMPLIN, MARK S.
Address	6565 HEADQUARTERS DRIVE W2-5A
City-State-Zip:	PLANO TX 75024

*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:** ELLEN L FARRELL**SECRETARY****03/06/2023**

Electronic Signature of Signing Officer/Director Detail

Date