

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000060306

Entity Name: CYPRESS CLAIMS SERVICES, INC.**Current Principal Place of Business:**3802 COCONUT PALM DR.
TAMPA, FL 33619**Current Mailing Address:**3802 COCONUT PALM DR.
TAMPA, FL 33619 US**FEI Number:** 27-3299614**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GRAHAM, ANDREW L
3802 COCONUT PALM DR.
TAMPA, FL 33619 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 D, P, CEO

Name PATEL, PARESH

Address 3802 COCONUT PALM DR.

City-State-Zip: TAMPA FL 33619

Title CFO

Name HARMSWORTH, JAMES M

Address 3802 COCONUT PALM DR.

City-State-Zip: TAMPA FL 33619

Title SECRETARY, GENERAL COUNSEL

Name GRAHAM, ANDREW L

Address 3802 COCONUT PALM DR.

City-State-Zip: TAMPA FL 33619

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: JAMES MARK HARMSWORTH

C.F.O.

04/21/2022

Electronic Signature of Signing Officer/Director Detail_____
Date