

**2016 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P94000074116

**Entity Name:** CYPRESS INSURANCE GROUP, INC.

**Current Principal Place of Business:**

800 EAST CYPRESS CREEK ROAD  
SUITE 400  
FT. LAUDERDALE, FL 33334

**Current Mailing Address:**

P.O. BOX 9328  
FT. LAUDERDALE, FL 33310 US

**FEI Number:** 65-0525578

**Certificate of Status Desired:** No

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

BOND, ROGER GPRES  
800 EAST CYPRESS CREEK ROAD  
SUITE 400  
FORT LAUDERDALE, FL 33334 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 P  
Name BOND, ROGER G  
Address 3111 NE 57TH ST  
City-State-Zip: FT LAUDERDALE FL 33308

Title VP  
Name BREITBART, STEVEN  
Address 5090 SW 89TH TERRACE  
City-State-Zip: COOPER CITY FL 33328

Title TS  
Name BOND, TERRY A  
Address 3111 NE 57TH ST  
City-State-Zip: FT LAUDERDALE FL 33308

Title VP  
Name ARCIOLA, DEBBIE  
Address 1351 NE 48 CT.  
City-State-Zip: OAKLAND PARK FL 33334

Title VP  
Name TEUTON, DOUGLAS  
Address 800 EAST CYPRESS CREEK ROAD  
SUITE 400  
City-State-Zip: FT. LAUDERDALE FL 33334

*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:** TERRY A BOND

**SECRETARY/TREASURER** 01/25/2016

Electronic Signature of Signing Officer/Director Detail

Date