## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000074116

Entity Name: CYPRESS INSURANCE GROUP, INC.

Entity Name. CTPRESS INSURANCE GROUP,

**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

FILED Jan 22, 2013

**Secretary of State** 

CC3991845922

Officer/Director Detail:

Title P Title VF

NameBOND, ROGER GNameBREITBART, STEVENAddress3111 NE 57TH STAddress5090 SW 89TH TERRACECity-State-Zip:FT LAUDERDALE FL 33308City-State-Zip:COOPER CITY FL 33328

Title TS Title VP

NameBOND, TERRY ANameROBINSON, TERRYAddress3111 NE 57TH STAddress2370 NE 7TH PLACE

City-State-Zip: FT LAUDERDALE FL 33308 City-State-Zip: FORT LAUDERDALE FL 33304

Title VP

Name ARCIOLA, DEBBIE Address 1351 NE 48 CT.

City-State-Zip: OAKLAND PARK 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 01/22/2013