

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000003636

**Entity Name:** AS&G CLAIMS ADMINISTRAGTION, INC.

**Current Principal Place of Business:**

5300 HOLLISTER, SUITE 400  
HOUSTON, TX 77040

**Current Mailing Address:**

5300 HOLLISTER, SUITE 400  
HOUSTON, TX 77040

**FEI Number:** 76-0516648

**Certificate of Status Desired:** Yes

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

LESLIE, HIMES  
5724 EAGLE CREEK RD.  
SARASOTA, FL 34238 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:** LESLIE HIMES

02/21/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name DOUGLAS, METZ  
Address 5300 HOLLISTER, SUITE 400  
City-State-Zip: HOUSTON TX 77040

Title V  
Name DEJAUNE, PHILLIPS  
Address 5300 HOLLISTER, SUITE 400  
City-State-Zip: HOUSTON TX 77040

Title SD  
Name ABERCROMBIE, MONICA  
Address 5300 HOLLISTER, SUITE 400  
City-State-Zip: HOUSTON TX 77040

Title TD  
Name HIMES, LESLIE  
Address 5300 HOLLISTER, SUITE 400  
City-State-Zip: HOUSTON TX 77040

Title VP  
Name HERNANDEZ, EDDIE  
Address 5300 HOLLISTER, SUITE 400  
City-State-Zip: HOUSTON TX 77040

Title VP  
Name ABERCROMBIE, JAMES T  
Address 5300 HOLLISTER, SUITE 400  
City-State-Zip: HOUSTON TX 77040

*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:** LESLIE HIMES

**TREASURER**

02/21/2023

Electronic Signature of Signing Officer/Director Detail

Date