|  | State of Rhode                                 |                             | Fee: \$50.00                        |  |  |  |  |
|--|--|-----------------------------|-------------------------------------|--|--|--|--|
| Office of the Secretary of State Division Of Business Services   |  |                             |                                     |  |  |  |  |
|  | 148 W. River Street                            |                             |                                     |  |  |  |  |
| 1636   | Providence RI 02904-2615<br>(401) 222-3040     |                             |                                     |  |  |  |  |
| Foreign Business Corpor  | ation  |                             |                                     |  |  |  |  |
| Annual Report<br>Filing Period: February 1 - Ma  | y 1  |                             |                                     |  |  |  |  |
| In accordance with R.I.G.L. 7-   | 1.2-1501(e), each corporatio                   | n failing or refusing to    | 0                                   |  |  |  |  |
| file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00. |  |                             |                                     |  |  |  |  |
| ANNUAL REPORT YEAR - ENTER THE CURRENT YEAR 2024: 2024   |  |                             |                                     |  |  |  |  |
| 1. Corporate ID No. 001713278  |  |                             |                                     |  |  |  |  |
| 2. Name of Corporation <u>HANCOCK CLAIMS CONSULTANTS HOLDINGS, INC.</u>  |  |                             |                                     |  |  |  |  |
| 3. Street Address Principal  | Business Office:                               |                             |                                     |  |  |  |  |
| No. and Street: <u>6875 SHILOH RD E</u>  |  |                             |                                     |  |  |  |  |
| City or Town: <u>ALPHA</u>   | ARETTA State: C                                | <u>GA</u> Zip: <u>30005</u> | Country: <u>USA</u>                 |  |  |  |  |
| 4. Business Phone No.  |  |                             |                                     |  |  |  |  |
|  |  |                             |                                     |  |  |  |  |
| 5. State of Incorporation  |  |                             |                                     |  |  |  |  |
| State: <u>DE</u>   |  |                             |                                     |  |  |  |  |
|  | NAICS CODE                                     |                             |                                     |  |  |  |  |
| Enter the six digit NAICS Cod<br>Download the list of codes <u>he</u>  |  | •                           | · · ·                               |  |  |  |  |
| <u>524291</u>  |  |                             |                                     |  |  |  |  |
| 6. Brief Description of the Character of Business Conducted in Rhode Island  |  |                             |                                     |  |  |  |  |
|  |  |                             |                                     |  |  |  |  |
| PROPERTY INSPECTIONS   |  |                             |                                     |  |  |  |  |
| 7. Names and Addresses of the Officers and Directors:  |  |                             |                                     |  |  |  |  |
| All officers and directors must be listed.   |  |                             |                                     |  |  |  |  |
| Title  | Individual Name<br>First, Middle, Last, Suffix |                             | dress<br>, State, Zip Code, Country |  |  |  |  |
| P  |  |                             |                                     |  |  |  |  |

| DIRECTOR, SECRETARY,<br>PRESIDENT | JOHN BRADFORD HANCOCK | 6875 SHILOH ROAD EAST<br>ALPHARETTA, GA 30005 USA |
|-----------------------------------|-----------------------|---|
|-----------------------------------|-----------------------|---|

## 8. Shares Authorized and Issued

| Class of Stock | Series of Stock | Par Value Per<br>Share | Total Authorized<br>Shares<br>Number of Shares | Total Issued<br>and<br>Outstanding<br><i>Num of</i><br><i>Shares</i> |
|----------------|-----------------|------------------------|--|--|
| CWP            |                 | \$0.0100               | 200,000.00                                     | 0  |

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

**Signed this 29 Day of February, 2024 at 3:37:43 PM.** *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.* 

## By PATRICIA WILLIAMS

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07

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