

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 542257 (1)
1. Corporation Name
SOUTHWEST WARRANTY CORPORATION

FILED
95 JAN 27 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE.

Principal Place of Business 714 MAIN ST. 22ND FLOOR FT. WORTH TX 76102 US		Mailing Address 714 MAIN STREET 22ND FLOOR FT. WORTH TX 76102 US		3. Date Incorporated or Qualified 08/04/1977	3a. Date of Last Report 01/26/1994
2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 59-1758742		Applied For Not Applicable	
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
23 City & State	28 City & State	6. Election Campaign Financing Trust Fund Contribution		☐ \$5.00 May Be Added to Fees	
24 Zip	25 Country	29 Zip		30 Country	
2. Principal Place of Business		2a. Mailing Address		8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes	
				☐ Yes ☒ No	

9. Name and Address of Current Registered Agent BUTLER, DENISE D. 110 NORTH MAGNOLIA ST. TALLAHASSEE FL 32301		10. Name and Address of New Registered Agent 81 Name The Prentice-Hall Corporation System, Inc. 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	AVPS	1.1 TITLE	☐ Change ☐ Addition
NAME	MARRAZZO, R.A.	1.2 NAME	
STREET ADDRESS	714 MAIN STREET	1.3 STREET ADDRESS	
CITY - ST - ZIP	FORT WORTH TX	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	HOOVER, EARL J JR.	2.2 NAME	
STREET ADDRESS	714 MAIN ST.	2.3 STREET ADDRESS	
CITY - ST - ZIP	FT WORTH FL	2.4 CITY - ST - ZIP	
TITLE	CPD	3.1 TITLE	C/CEO/D ☒ Change ☐ Addition
NAME	LASATER, G.M.	3.2 NAME	
STREET ADDRESS	714 MAIN ST.	3.3 STREET ADDRESS	
CITY - ST - ZIP	FT. WORTH TX	3.4 CITY - ST - ZIP	
TITLE	SVPD	4.1 TITLE	P/D ☒ Change ☐ Addition
NAME	MOORE, C. J	4.2 NAME	
STREET ADDRESS	714 MAIN ST.	4.3 STREET ADDRESS	
CITY - ST - ZIP	FT. WORTH TX	4.4 CITY - ST - ZIP	
TITLE	SVP	5.1 TITLE	☐ Change ☐ Addition
NAME	WOHL, ELLIOT	5.2 NAME	
STREET ADDRESS	714 MAIN ST.	5.3 STREET ADDRESS	
CITY - ST - ZIP	FORT WORTH TX	5.4 CITY - ST - ZIP	
TITLE	V	6.1 TITLE	V/T ☒ Change ☐ Addition
NAME	MCDOWELL, M.H.	6.2 NAME	Jan M. Dittmar
STREET ADDRESS	714 MAIN ST.	6.3 STREET ADDRESS	
CITY - ST - ZIP	FT. WORTH TX	6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER IN FULL ON DIRECTOR

Ross A. Marrazzo

1/17/95

817-390-1285