

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000943

FILED
Jan 06, 2009
Secretary of State

Entity Name: ASURION SERVICE PLANS OF FLORIDA, INC.

Current Principal Place of Business:

648 GRASSMERE PARK, STE 300
NASHVILLE, TN 37211

New Principal Place of Business:

Current Mailing Address:

648 GRASSMERE PARK, STE 300
NASHVILLE, TN 37211

New Mailing Address:

FEI Number: 26-1911630 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR SUITE 1
WESTON, FL 33331 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: C () Delete
Name: LAVE, CHARLES A
Address: 8880 WARD PKWY
City-St-Zip: KANSAS CITY, MO 641142762

Title: VC () Delete
Name: TAWHEEL, KEVIN M
Address: 160 BOVET RD SUITE 402
City-St-Zip: SAN MATEO, CA 944023114

Title: D () Delete
Name: COMOLLI, BRET E
Address: 648 GRASSMERE PARK DR SUITE 300
City-St-Zip: NASHVILLE, TN 372113658

Title: DP () Delete
Name: TUDOR, DOUG
Address: 3110 CROSSING PARK RD
City-St-Zip: NORCROSS, GA 30071

Title: VPT () Delete
Name: REAGAN, WILLARD J
Address: 648 GRASSMERE PARK DR SUITE 300
City-St-Zip: NASHVILLE, TN 372113658

Title: S () Delete
Name: RAKOW, JOHN W III
Address: 647 GRASSMERE PARK DR SUITE 300
City-St-Zip: NASHVILLE, TN 372113658

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: LAUE, CHARLES A
Address: 8880 WARD PKWY
City-St-Zip: KANSAS CITY, MO 641142762

Title: DIR (X) Change () Addition
Name: TAWHEEL, KEVIN M
Address: 160 BOVET RD SUITE 402
City-St-Zip: SAN MATEO, CA 944023114

Title: DIR (X) Change () Addition
Name: COMOLLI, BRET E
Address: 648 GRASSMERE PARK DR SUITE 300
City-St-Zip: NASHVILLE, TN 372113658

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CHARLES A. LAUE

DIR

01/06/2009

Electronic Signature of Signing Officer or Director

_____ Date