

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004439

FILED
Mar 01, 2011
Secretary of State

Entity Name: N.E.W. WARRANTY SERVICES, INC.

Current Principal Place of Business:

22660 EXECUTIVE DRIVE,SUITE 122
STERLING, VA 20166

New Principal Place of Business:

Current Mailing Address:

8880 WARD PARKWAY
KANSAS CITY, MO 64114

New Mailing Address:

FEI Number: 33-1024505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: OFFI
Name: NADER, III, ANTHONY P PRESIDE
Address: 22660 EXECUTIVE DRIVE,SUITE 122
City-St-Zip: STERLING, VA 20166

Title: DIRE
Name: NADER, III, ANTHONY P DIRECTO
Address: 22660 EXECUTIVE DRIVE,SUITE 122
City-St-Zip: STERLING, VA 20166

Title: OFFI
Name: SCHAUFELD, FREDRICK D CEO
Address: 22660 EXECUTIVE DRIVE,SUITE 122
City-St-Zip: STERLING, VA 20166

Title: OFFI
Name: BOSSERMAN, DAVID N TREASUR
Address: 22660 EXECUTIVE DRIVE,SUITE 122
City-St-Zip: STERLING, VA 20166

Title: DIRE
Name: BOSSERMAN, DAVID N DIRECTO
Address: 22660 EXECUTIVE DRIVE,SUITE 122
City-St-Zip: STERLING, VA 20166

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: ANTHONY P. NADER, III

PRES

03/01/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date