

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000001727

FILED  
Apr 04, 2012  
Secretary of State

**Entity Name:** ASURION PROTECTION SERVICES, LLC

**Current Principal Place of Business:**

8880 WARD PARKWAY  
KANSAS CITY, MO 64114

**New Principal Place of Business:**

8880 WARD PARKWAY  
5TH FLOOR  
KANSAS CITY, MO 64114

**Current Mailing Address:**

8880 WARD PARKWAY  
KANSAS CITY, MO 64114

**New Mailing Address:**

8880 WARD PARKWAY  
5TH FLOOR  
KANSAS CITY, MO 64114

FEI Number: 48-1248614

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: TAWHEEL, KEVIN M  
Address: 160 BOVET ROAD, SUITE 402  
City-St-Zip: SAN MATEO, CS 94402

Title: MGR  
Name: RISK, GERALD A  
Address: 648 GRASSMERE PARK DRIVE, SUITE 300  
City-St-Zip: NASHVILLE, TN 37211

Title: MGR  
Name: LAUE, CHARLES A  
Address: 8880 WARD PARKWAY  
City-St-Zip: KANSAS CITY, MO 64114

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHARLES A LAUE

MGR

04/04/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date