2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P1600009209

Entity Name: SECURED ASSURANCE WARRANTY, INC.

Current Principal Place of Business:

2800 U.S. HIGHWAY 98 N. BARTOW, FL 33830

Current Mailing Address:

P.O. BOX 1700 BARTOW, FL 33831-1700 US

FEI Number: 81-1413415

Name and Address of Current Registered Agent:

LAW OFFICE OF RICHARD A. LOPEZ, P.A. 933 S. FLORIDA AVENUE LAKELAND, FL 33803 US

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 | E: RICHARD A. LOPEZ | | | 02/19/2019 |
|---------------------------|--|-----------------|--------------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Officer/Director Detail : | | | | |
| Title | PRESIDENT, DIRECTOR | Title | VP, DIRECTOR | |
| Name | ROBLES, BENJAMIN JOSEPH | Name | ROBLES, BENJAMIN JACINTO | |
| Address | 2800 U.S. HIGHWAY 98 N. | Address | 2800 U.S. HIGHWAY 98 N. | |
| City-State-Zip: | BARTOW FL 33830 | City-State-Zip: | BARTOW FL 33830 | |
| Title | SECRETARY, TREASURER, DIRECTOR, CFO | | | |
| Name | BARRON, TIMOTHY CHASECHAD | | | |
| Address | 2800 U.S. HIGHWAY 98 N. | | | |
| City-State-Zip: | BARTOW FL 33830 | | | |

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: TIMOTHY BARRON

SEC/TREAS

02/19/2019 Date

Electronic Signature of Signing Officer/Director Detail

FILED Feb 19, 2019 Secretary of State 7374551140CC

Certificate of Status Desired: No