

**2023 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P16000050495

**Entity Name:** MAPFRE WARRANTY CORPORATION OF FLORIDA**Current Principal Place of Business:**7300 CORPORATE CENTER DR.  
SUITE 601  
MIAMI, FL 33126**Current Mailing Address:**7300 CORPORATE CENTER DR.  
SUITE 601  
MIAMI, FL 33126 US**FEI Number:** 81-2900487**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:** TYLER YATES

04/18/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	CHAIRMAN	Title	PRESIDENT AND CEO
Name	OLOHAN, DANIEL P.	Name	TAMAYO, JAIME
Address	211 MAIN ST.	Address	211 MAIN ST.
City-State-Zip:	WEBSTER MA 01570	City-State-Zip:	WEBSTER MA 01570
Title	VP, TAX	Title	DIRECTOR
Name	DOWELL, DAMON	Name	CORRAL, JOSE
Address	7300 CORPORATE CENTER DR. SUITE 601	Address	211 MAIN ST
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	WEBSTER MA 01570
Title	CFO AND DIRECTOR	Title	SECRETARY
Name	AMADORI, JESUS	Name	SHER, MICHAEL S.
Address	211 MAIN ST	Address	211 MAIN ST
City-State-Zip:	WEBSTER MA 01570	City-State-Zip:	WEBSTER MA 01570
Title	COO	Title	TREASURER
Name	PINO, STEVE	Name	MECIAK, JOHN M.
Address	6565 AMERICAS PARKWAY NE SUITE 1000	Address	211 MAIN ST.
City-State-Zip:	ALBUQUERQUE NM 87110	City-State-Zip:	WEBSTER MA 01570

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:** STEVE PINO**CHIEF OPERATING  
OFFICER**

04/18/2023

Electronic Signature of Signing Officer/Director Detail

Date