

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000103738

**Entity Name:** WARRANTY OF AMERICA MANAGEMENT, LLC

**Current Principal Place of Business:**

5011 S STATE RD 7  
107  
DAVIE, FL 33314

**Current Mailing Address:**

5011 S STATE ROAD 7  
106  
DAVIE, FL 33314 US

**FEI Number:** 27-3647986

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

WASSERSTROM, KEITH  
5011 S STATE ROAD 7  
106  
DAVIE, FL 33314 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGRM  
Name WASSERSTROM, KEITH  
Address 3810 N 41 AVE  
City-State-Zip: HOLLYWOOD FL 33021

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KEITH WASSERSTROM

**MANAGER**

**02/19/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date