2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004146

Entity Name: ASURION WARRANTY SERVICES, INC.

Current Principal Place of Business:

300 SOUTH WACKER DRIVE, STE 1350

CHICAGO, IL 60606

Current Mailing Address:

8880 WARD PARKWAY 5TH FLOOR

KANSAS CITY, MO 64114

FEI Number: 04-3707394 Certificate of Status Desired: No.

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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

FILED Feb 04, 2016

Secretary of State

CC6229877133

Officer/Director Detail:

Title DIRECTOR, CHAIRMAN Title CFO, DIRECTOR, SR. VICE

PRESIDENT

ASST. TREASURER

TAWEEL, KEVIN M Name Name GUNNING, MARK S Address 160 BOVET ROAD, SUITE 402

648 GRASSMERE PARK, SUITE 100 Address

SAN MATEO CA 94410-3114 City-State-Zip: City-State-Zip: NASHVILLE TN 37211-3658

Title **PRESIDENT**

Title SECRETARY, SR. VICE PRESIDENT, Name LAUE, CHARLES A GENERAL COUNSEL

Name

Title

PURYEAR IV, GUSTAVUS A 8880 WARD PARKWAY Address 5TH FLOOR

Address 648 GRASSMERE PARK, SUITE 100 City-State-Zip: KANSAS CITY MO 64114

City-State-Zip: NASHVILLE TN 37211

Title VICE PRESIDENT OF FINANCE,

TREASURER

Name MARTIN, JASON Name REAGAN, WILLARD J

648 GRASSMERE PARK, SUITE 100 Address 8880 WARD PARKWAY Address **5TH FLOOR**

City-State-Zip: NASHVILLE TN 37211 City-State-Zip: KANSAS CITY MO 64114

Title ASST. SECRETARY, VP Title ASST. SECRETARY

TOPOREK, LISA Name MACHALINSKI, RICHARD Name 648 GRASSMERE PARK Address

300 SOUTH WACKER DRIVE Address STF 100

STF 1350

NASHVILLE TN 37211 City-State-Zip: CHICAGO IL 60606 City-State-Zip:

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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.

02/04/2016 SIGNATURE: CHARLES A. LAUE **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

ASST. TREASURER, VP Title Title ASST. TREASURER Name ALEXANDER, ELIZABETH Name SLOAN, JASON

648 GRASSMERE PARK 648 GRASSMERE PARK Address Address STE 100

STE 100

City-State-Zip: NASHVILLE TN 37211 City-State-Zip: NASHVILLE TN 37211

Title ASST. TREASURER Title ASST. TREASURER Name KASPRZAK, RYAN Name MARTIN, JASON

8880 WARD PARKWAY Address 300 SOUTH WACKER DRIVE, STE 1350 Address

5TH FLOOR

City-State-Zip: CHICAGO IL 60606 City-State-Zip: KANSAS CITY MO 64114