2017 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:

11460 TOMAHAWK CREEK PKWY

STE 300

LEAWOOD, KS 66211 US

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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Feb 25, 2017

Secretary of State

CC2282544276

Officer/Director Detail:

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

PRESIDENT

ASST. TREASURER

Name TAWEEL, KEVIN M 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

Title

Name PURYEAR IV, GUSTAVUS A 11460 TOMAHAWK CREEK PKWY Address

STE. 300

Address 648 GRASSMERE PARK, SUITE 100 City-State-Zip: LEAWOOD KS 66211

City-State-Zip: NASHVILLE TN 37211

Title SR. VICE PRESIDENT OF FINANCE,

TREASURER

Name MARTIN, JASON Name REAGAN, WILLARD J

648 GRASSMERE PARK, SUITE 100 Address 11460 TOMAHAWK CREEK PKWY Address

STE. 300 City-State-Zip: NASHVILLE TN 37211 City-State-Zip: LEAWOOD KS 66211

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

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.

02/25/2017 SIGNATURE: CHARLES A. LAUE **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

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

Address 648 GRASSMERE PARK Address 648 GRASSMERE PARK STE 100

STE 100

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