2017 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F03000006192

Entity Name: ASURION FLORIDA WARRANTY SERVICES, INC.

FILED Jul 06, 2017 Secretary of State CC0108351321

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: 20-0473975 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

Officer/Director Detail:

Title CHAIRMAN AND CHIEF EXECUTIVE Title **PRESIDENT**

OFFICER Name

LAUE. CHARLES A Name TAWEEL. KEVIN M Address 11460 TOMAHAWK CREEK PKWY

Address 160 BOVET ROAD, SUITE 402

LEAWOOD KS 66211 City-State-Zip: SAN MATEO CA 94402 City-State-Zip:

SR. VICE PRESIDENT OF FINANCE, Title ASST. SECRETARY, VP Title **TREASURER**

Name TOPOREK, LISA E Name REAGAN, WILLARD J

Address 648 GRASSMERE PARK, STE 100 Address 648 GRASSMERE PARK, SUITE 100

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

Title SECRETARY, SR. VICE PRESIDENT, Title

ASST. SECRETARY GENERAL COUNSEL

MACHALINSKI, RICHARD Name Name PURYEAR, GUSTAVUS A IV

300 SOUTH WACKER DRIVE Address Address 648 GRASSMERE PARK

STE 1350 **STE 100**

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

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

648 GRASSMERE PARK Address 648 GRASSMERE PARK Address

STE 100 **STE 100**

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

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STE. 300

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.

07/06/2017 SIGNATURE: CHARLES A LAUE PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

ASST. TREASURER Title Title DIRECTOR

Name MARTIN, JASON Name DETTER, ROGER

11460 TOMAHAWK CREEK PKWY 160 BOVET RD Address Address STE 402

STE. 300

City-State-Zip: LEAWOOD KS 66211 City-State-Zip: SAN MATEO CA 94402

SENIOR VICE PRESIDENT, CFO, AND DIRECTOR Title

Name STOREY, JOHN

Address 648 GRASSMERE PARK

STE 100

City-State-Zip: NASHVILLE TN 37211