

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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FILED
Feb 25, 2017
Secretary of State
CC2840480748

Entity Name: ASURION FLORIDA 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: 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, DIRECTOR
Name TAWEEL, KEVIN M
Address 160 BOVET ROAD, SUITE 402
City-State-Zip: SAN MATEO CA 94402

Title CFO, DIRECTOR, SR. VICE PRESIDENT
Name GUNNING, MARK S
Address 648 GRASSMERE PARK STE. 100
City-State-Zip: NASHVILLE TN 37211

Title PRESIDENT
Name LAUE, CHARLES A
Address 11460 TOMAHAWK CREEK PKWY STE. 300
City-State-Zip: LEAWOOD KS 66211

Title ASST. SECRETARY, VP
Name TOPOREK, LISA E
Address 648 GRASSMERE PARK, STE 100
City-State-Zip: NASHVILLE TN 37211

Title SR. VICE PRESIDENT OF FINANCE, TREASURER
Name REAGAN, WILLARD J
Address 648 GRASSMERE PARK, SUITE 100
City-State-Zip: NASHVILLE TN 37211

Title SECRETARY, SR. VICE PRESIDENT, GENERAL COUNSEL
Name PURYEAR, GUSTAVUS A IV
Address 648 GRASSMERE PARK STE 100
City-State-Zip: NASHVILLE TN 37211

Title ASST. SECRETARY
Name MACHALINSKI, RICHARD
Address 300 SOUTH WACKER DRIVE STE 1350
City-State-Zip: CHICAGO IL 60606

Title ASST. TREASURER, VP
Name ALEXANDER, ELIZABETH
Address 648 GRASSMERE PARK STE 100
City-State-Zip: NASHVILLE TN 37211

Continues on page 2

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: CHARLES A. LAUE

PRESIDENT

02/25/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASST. TREASURER
Name SLOAN, JASON
Address 648 GRASSMERE PARK
STE 100
City-State-Zip: NASHVILLE TN 37211

Title ASST. TREASURER
Name MARTIN, JASON
Address 11460 TOMAHAWK CREEK PKWY
STE. 300
City-State-Zip: LEAWOOD KS 66211