2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000000943

Entity Name: ASURION SERVICE PLANS OF FLORIDA, INC.

FILED
Mar 23, 2021
Secretary of State
2015002162CC

Current Principal Place of Business:

11460 TOMAHAWK CREEK PKWY

SUITE 300

LEAWOOD, KS 66211

Current Mailing Address:

648 GRASSMERE PARK

STE 100

NASHVILLE, TN 37211 US

FEI Number: 26-1911630 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:

Name

Address

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title CHAIRMAN Title PRESIDENT

Name TAWEEL, KEVIN Name LAUE, CHARLES A

Address 160 BOVET RD Address 11460 TOMAHAWK CREEK PKWY

STE 402 STE. 300

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

Title SENIOR VICE PRESIDENT OF Title SENIOR VICE PRESIDENT, GENERAL

FINANCE AND TREASURER

COUNSEL, AND SECRETARY

REAGAN, WILLARD J Name PURYEAR, GUSTAVUS A IV

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

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

Title ASSISTANT SECRETARY Title VICE PRESIDENT AND ASST.

Name GAUL, KRISTEN TREASURER

Address 648 GRASSMERE PARK, SUITE 100 Name ALEXANDER, ELIZABETH

Address 648 GRASSMERE PARK

City-State-Zip: NASHVILLE TN 37211 STE 100

City-State-Zip: NASHVILLE TN 37211
Title CEO AND DIRECTOR

Name DETTER, ROGER Title SENIOR VICE PRESIDENT, CFO, AND

DIRECTOR

160 BOVET RD

STE 402 Name STOREY, JOHN

City-State-Zip: SAN MATEO CA 94402 Address 648 GRASSMERE PARK

STE 100

City-State-Zip: NASHVILLE TN 37211

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: JOHN A. STOREY SENIOR VICE PRESIDENT 03/23/2021