

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000006403

FILED  
Jul 23, 2008  
Secretary of State

Entity Name: NATIONAL AUTO WARRANTY SERVICES, INC.

## Current Principal Place of Business:

100 MALL PARKWAY  
WENTZVILLE, MO 63385

## New Principal Place of Business:

## Current Mailing Address:

100 MALL PARKWAY  
WENTZVILLE, MO 63385

## New Mailing Address:

FEI Number: 43-1933846

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD., SUITE 101  
TALLAHASSEE, FL 323012960 US

## Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPS ( ) Delete  
Name: ATKINSON, DARAIN  
Address: 1009 HAWKS LANDING DRIVE  
City-St-Zip: LAKE ST. LOUIS, MO 63367

Title: DVP ( ) Delete  
Name: ATKINSON, CORY C  
Address: 20 SIGNAL HILL  
City-St-Zip: ST. CHARLES, MO 63301

Title: CFO (X) Delete  
Name: JEHLE, PHILIP  
Address: 3 FORT SUMTER COURT  
City-St-Zip: ST. CHARLES, MO 63303

Title: VP (X) Delete  
Name: JEHLE, PHILIP J  
Address: 3 FORT SUMTER CT  
City-St-Zip: SAINT CHARLES, MO 63303

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DVP (X) Change ( ) Addition  
Name: ATKINSON, CORY C  
Address: 302 ATKINSON WAY  
City-St-Zip: ST. CHARLES, MO 63385

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DARAIN ATKINSON

PRES

07/23/2008

Electronic Signature of Signing Officer or Director

Date