

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004762

Entity Name: WARRANTY DIRECT INC

FILED
Apr 04, 2011
Secretary of State

Current Principal Place of Business:

333 EARLE OVINGTON BLVD, SUITE 700
UNIONDALE, NY 11553

New Principal Place of Business:

6120 POWERS FERRY RD NW
SUITE 200
ATLANTA, GA 30339

Current Mailing Address:

333 EARLE OVINGTON BLVD, SUITE 700
UNIONDALE, NY 11553

New Mailing Address:

6120 POWERS FERRY RD NW
SUITE 200
ATLANTA, GA 30339

FEI Number: 11-3272124

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANK & MEENAN
204 S. MONROE STREET
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: CP
Name: FETHERSTON, SHAUN M
Address: 6120 POWERS FERRY RD NW, SUITE 200
City-St-Zip: ATLANTA, GA 30339

Title: V
Name: ALTMAN, LAWRENCE J
Address: 6120 POWERS FERRY RD NW, SUITE 200
City-St-Zip: ATLANTA, GA 30339

Title: S
Name: MORLEY, BREANNE
Address: 6120 POWERS FERRY RD NW, SUITE 200
City-St-Zip: ATLANTA, GA 30339

Title: EVP
Name: WILLIAMS, TARA
Address: 6120 POWERS FERRY RD NW, SUITE 200
City-St-Zip: ATLANTA, GA 30339

Title: CFO
Name: TIRONE, GEOFFREY J
Address: 6120 POWERS FERRY RD NW, SUITE 200
City-St-Zip: ATLANTA, GA 30339

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: BREANNE MORLEY

S

04/04/2011

Electronic Signature of Signing Officer or Director

Date