FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
95 MAY -1 AM 8:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F49153** **(2)**

1. Corporation Name
SECURITY WARRANTY ASSOCIATION OF FLORIDA, INC.

DO NOT WRITE IN THIS SPACE.

Principal Place of Business	Mailing Address
901 DOUGLAS AVENUE ALTAMONTE SPRINGS FL 32714	9 FARM SPRINGS DRIVE FARMINGTON CT 06032 US

3. Date Incorporated or Qualified: **10/09/1981**
3a. Date of Last Report: **04/28/1994**

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 / Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 / Country — 30

4. FEI Number: **06-1056959** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DC	11 TITLE		☒ Change ☐ Addition
NAME	SANBORN, ROBERT B.	12 NAME		
STREET ADDRESS	9 FARM SPRINGS DRIVE.	13 STREET ADDRESS	terminated	
CITY-ST-ZIP	FARMINGTON CT	14 CITY-ST-ZIP		
TITLE	SVP	21 TITLE	SVPT	☒ Change ☐ Addition
NAME	PAPA, VINCENT T.	22 NAME		
STREET ADDRESS	30 ROCKFELLER PLAZA.	23 STREET ADDRESS	600 Fifth Avenue	
CITY-ST-ZIP	NEW YORK, NY.	24 CITY-ST-ZIP	New York, NY 10020	
TITLE	SVP	31 TITLE		☒ Change ☐ Addition
NAME	SCHUYLER, RAYMOND J.	32 NAME		
STREET ADDRESS	30 ROCKEFELLER PLAZA	33 STREET ADDRESS	600 Fifth Avenue	
CITY-ST-ZIP	NEW YORK NY	34 CITY-ST-ZIP	New York, NY 10020	
TITLE	DVG	41 TITLE	DVGCS	☒ Change ☐ Addition
NAME	FULLWOOD, STANLEY.	42 NAME		
STREET ADDRESS	9 FARM SPRINGS DRIVE.	43 STREET ADDRESS		
CITY-ST-ZIP	FARMINGTON CT	44 CITY-ST-ZIP		
TITLE	SVP	51 TITLE	SVPCT	☒ Change ☐ Addition
NAME	BARRY, DANIEL L.	52 NAME		
STREET ADDRESS	9 FARM SPRINGS DRIVE	53 STREET ADDRESS		
CITY-ST-ZIP	FARMINGTON CT	54 CITY-ST-ZIP		
TITLE	VAS	61 TITLE		☒ Change ☐ Addition
NAME	BISSONNETTE, MARSHA O	62 NAME	terminated	
STREET ADDRESS	9 F ARM SPRINGS DR	63 STREET ADDRESS		
CITY-ST-ZIP	FARMINGTON CT	64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Stanley G. Fullwood 1.19.95
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL OFFICER OR DIRECTOR — Date — Area Code & Phone #

Stanley G. Fullwood

000095 CP

F49163

SECURITY WARRANTY ASSOCIATION OF FLORIDA, INC.

DIRECTORS

STANLEY G. FULLWOOD	9 Farm Springs Drive Farmington, CT 06032
LARRY D. HOLLEN	9 Farm Springs Drive Farmington, CT 06032
ARTHUR B. MCHUGH	9 Farm Springs Drive Farmington, CT 06032

F49153

SECURITY WARRANTY ASSOCIATION OF FLORIDA, INC.

OFFICERS

Larry D. Hollen Vice Chairman	9 Farm Springs Drive Farmington, CT 06032
Arthur B. McHugh President	9 Farm Springs Drive Farmington, CT 06032
Daniel L. Barry Sr. Vice President, Controller	9 Farm Springs Drive Farmington, CT 06032
Vincent T. Papa Sr. Vice President, Treasurer	600 Fifth Avenue New York, NY 10020
Raymond J. Schuyler Sr. Vice President - Investments	600 Fifth Avenue New York, NY 10020
Stanley G. Fullwood Vice President, General Counsel, Secretary	9 Farm Springs Drive Farmington, CT 06032
Craig A. Nyman Vice President, Assistant Treasurer	9 Farm Springs Drive Farmington, CT 06032
Kevin W. Sullivan Vice President - Investments	600 Fifth Avenue New York, NY 10020

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