3

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 28, 2002 8:00 am
Secretary of State
03-27-2002 90039 041 ***150.00

DOCUMENT # F93000003172

N/C NOT Filed AM

1. Entity Name

~~ROAD RESCUE INCORPORATED~~

Asurion Roadside Assistance Services, Inc.

Principal Place of Business	Mailing Address
1700 SOUTH EL CAMINO REAL STE 502 SAN MATEO CA 94402 US	10777 NW FREEWAY STE 200 HOUSTON TX 77092 US

[redacted]

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 76-0211807 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After May 1, 2002 Fee will be $550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	C TAWEEL, KEVIN ROAD RESCUE INC, 1700 S EL CAMINO REAL 502 SAN MATEO CA ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PS ELLIS, R J RE 1700 S EL CAMINO REAL SAN MATEO CA ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CEO P Comolli, Bret 1700 South El Camino Real, Ste 502 San Mateo, CA 94402 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO RISK, GERALD 1700 SOUTH EL CAMINO REAL, SUITE 502 SAN MATEO CA 94403 ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Geisler, Ashley 1700 South El Camino Real, Ste 502 San Mateo, CA 94402 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP RANDO, JOE 10777 NORTHWEST FREEWAY, SUITE 200 HOUSTON TX 77092 ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AS Wood, Larry 10777 Northwest Frwy, Ste 200 Houston, TX 77092 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DODSON, DAVID A 625 BODWELL ST EXTENSION, STE 600 AVON MA ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Taweel, Kevin 1700 South El Camino Real, Ste 502 San Mateo, CA 94402 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D OSTER, ROBERT 3000 SAN HILL RD, BLDG 3, STE 210 MENLO PARK CA ☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Ellis, R. James 1700 South El Camino Real, Ste 502 San Mateo, CA 94402 ☐ Change ☒ Addition

CR2E034 (9/01)

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 3/02 713-316-1800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #