## 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT #** 

F9900005814

1. Entity Name

FIRST ASSURED WARRANTY CORPORATION



**FILED** Aug 11, 2003 8:00 am Secretary of State

08-11-2003 90286 024 \*\*\*550.00

				OO WE THE	<u> </u>				
Principal Plac	e of Business	Mailing Address							
	BEC. STE. 300-B	5600 S. QUEBEC, STE. 3							
GREENWOOD	VILLAGE CO 80111	GREENWOOD VILLAGE C	0 80111		1 (BO)(BO (310 (B))( (113) (B))( 131			1(8), 8)6) (88)	
2. Principal P	lace of Business	3. Mailing Address				il Deill Beig de	ibi bilbi ibibi		
7935 E. PRENTICE ME 7935 E. PERL				CE AVE					
Suite, Apt. #, etc. Suite, Apt. #, etc.					CHECK HERE I	IE MAKING I			
# 40	<b>∞</b>	# 400 _			U CHECK HERE	- MANING	JHANGES		
City & State Co City & State				(0)	4. FEI Number 84-1366869		<u> </u>	oplied For	]
OREENLECTO VILLAGE GREENLECOO L				CLAGE				ot Applicable	4
801	Country USA	2ip <b>850 !!!</b>	Country	SA	5. Certificate of Status Desired		8.75 Ad		
001	6. Name and Address of Current R		<u> </u>	7-271	7. Name and Address of New Re				4
	o. Name and Address of Current N	<del></del>	Name						
CT CORPORATION SYSTEM									
				Street Address (P.O. Box Number is Not Acceptable)					
1200 SOUTH PINE ISLAND ROAD									1
PLANIAII	ON FL 33324								
				City		FL	Zip Cod	le	ı
8. The above	named entity submits this statement for	the ourpose of changing its	registered o	office or register	ed agent, or both, in the State of Flo	rida Lam fa	 miliar with.	and accept	1
	ions of registered agent.	and parpoon or sparing no	. og.o.o.o.	onio on regional	ou agong or board at the brace or the			4114 444 444	
SIGNATURE .	Signature, typed or printed name of registered agent an-	d title if applicable. (NOTI	E: Registered Ag	ent signature required	l when reinstating)	DATE		<del></del>	
		<del></del>							-{
FILE NOW!!! FEE IS \$550.00 After September 10, 2003 Fee will be \$750.00					9. Election Campaign Fin		\$5.0	00 May Be	
	Revable to Florida Department of S	1			Trust Fund Contribution	ı. ' 🗆	Adde	d to Fees	1
10.	OFFICERS AND D	<u></u> .	11.		ADDITIONS/CHANGES TO OFFI	CERS AND I	DIBECTOR	S IN 11	-
TITLE	D	□ Delete	TITLE		ADDITIONO, OF IANGEO TO OFF		☐ Change	Addition	1 5
NAME	HOLDEN, NANCY C	. La Delete	NAME			- 1	· Oligings		17.47
STREET ADDRESS	5600 S. QUEBEC, STE. 300-B		STREET A	DDRESS					5
CITY-ST-ZIP			CITY-ST-	ZIP					Ü
TITLE	D	Delete	TITLE	-  -		<del></del>	Change	Addition	10
NAME	DUNGAN, ROBERT E		NAME		;				Ì
STREET ADDRESS	33 PAGE AVE., STE. 200		STREET A	DDRESS	·				
CITY-ST-ZIP	ASHEVILLE NC 28801		CITY-ST-	ZIP					
TITLE	PD	Delete	TITLE		——————————————————————————————————————		Change	Addition	ĺ
NAME	STORRER, MARK		NAME		and the second of the second o			-	1
~STREET ADDRESS	5600 S. QUEBEC, STE. 300-B		STREET A	j j	-	7			
CITY-ST-ZIP	GREENWOOD VILLAGE CO 80111		CITY-ST-	LIF					-
TITLE	VTS	☐ Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS	WILKINS, ALAN 5600 S. QUEBEC, STE. 300-B		name Street al	nnaece		•			
CITY-ST-ZIP	GREENWOOD VILLAGE CO 80111		CITY-ST-	t t				•	
	CHELITYOU TILLYOL OU DOTT						Change	Addition	1
TITLE NAME		☐ Delete	title Name			(	Uranye		
STREET ADDRESS			STREET AL	DDRESS					
CITY-ST-ZIP	·		CITY-ST-						
TITLE		☐ Delete	TITLE				Change	Addition	1
NAME	•		NAME						
STREET ADDRESS			STREET AL	DDRESS		•			1
CITY-ST-ZIP			CITY-ST-	ZIP					1

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

303)741-1946