2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000087484

Entity Name: WARRANTY HOLDINGS, INC.

FILED Apr 25, 2008 Secretary of State

Littly Na	IIIC. WARRAN	TTT HOLDINGS, INC.					
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
	WNE LAKE DR	IVE					
SUITE 7 FORT MYI	ERS, FL 33913	3 US					
Current M	lailing Addres	s:	New Maili	New Mailing Address:			
12331 TO\	WNE LAKE DR	IVE					
SUITE 7	ERS, FL 33913	3 US					
	: 26-0642233	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Des	ired ()	
				. ,			
Name and	I Address of C	urrent Registered Agent:	Name and	i Address of	New Registered Agent	:	
BROWN, I 12331 TO\ SUITE 7	DAVID M WNE LAKE DR	IVE					
	ERS, FL 33913	3 US					
	named entity s e of Florida.	submits this statement for the	purpose of changing i	its registered	office or registered ager	nt, or both,	
SIGNATUI	RE:						
	Electron	ic Signature of Registered Ag	ent		Date		
Election Car	mpaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title:	٠,	Delete	Title:		(X) Change () Addition		
Name: Address:	BROWN, DAVID) M LAKE DRIVE, SUITE 7	Name: Address:	BROWN, DAY	VID M NE LAKE DRIVE, SUITE 7		
City-St-Zip:	FORT MYERS,	*	City-St-Zip:		S, FL 33913 US		
Title:	VP ()	Delete	Title:	VPD	(X) Change () Addition		
Name:	BROWN, D'ARC		Name:	BROWN, D'A			
Address: City-St-Zip:	FORT MYERS,	LAKE DRIVE, SUITE 7 FL 33913 US	Address: City-St-Zip:		NE LAKE DRIVE, SUITE 7 S, FL 33913 US		
Title:	T ()	Delete	Title:		() Change () Addition		
Name:	BROWN, D'ARC	ΥL	Name:				
Address:		LAKE DRIVE, SUITE 7	Address:				
City-St-Zip:	FORT MYERS,	FL 33913 US	City-St-Zip:				
Title:	, ,	Delete	Title:		() Change () Addition		
Name:	BROWN, D'ARC		Name:				
Address:		LAKE DRIVE, SUITE 7	Address:				
City-St-Zip:	FORT MYERS,	rl 33813 US	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: DAVID M. BROWN PD 04/25/2008