

# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jun 11, 2002 8:00 am**  
**Secretary of State**

05-02-2002 90030 002 \*\*\*150.00

**DOCUMENT # P95000033878**

1. Entity Name

**NATIONAL WARRANTY OF FLORIDA, INC.**

Principal Place of Business

7391 W. 38TH AVE.  
 #150  
 WHEAT RIDGE CO 80033

Mailing Address

P. O. BOX 1088  
 WHEAT RIDGE CO 80034-1088  
 US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



DO NOT WRITE IN THIS SPACE

4. FEI Number

**84-1309131**

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**F&L CORP.**  
**THE GREENLEAF BUILDING**  
**200 LAURA STREET**  
**JACKSONVILLE FL 32202-3510**

7. Name and Address of New Registered Agent

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)

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**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

TITLE	PD	<input type="checkbox"/> Delete
NAME	HAUGEN, DANIEL	
STREET ADDRESS	7391 W. 38TH AVE. #150	
CITY-ST-ZIP	WHEAT RIDGE CO 80033	
TITLE	STVP	<input type="checkbox"/> Delete
NAME	LARUE, MICHAEL	
STREET ADDRESS	7391 W. 38TH AVE. #150	
CITY-ST-ZIP	WHEAT RIDGE CO 80033	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	Richard Anderson	
STREET ADDRESS	550 Maryville Center Dr. #500	
CITY-ST-ZIP	St. Louis MO 63141	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GREGG CAPOLANO	
STREET ADDRESS	550 Maryville Center Dr. #500	
CITY-ST-ZIP	St. Louis MO 63141	
TITLE	SR.VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Dominic Sansone	
STREET ADDRESS	7391 W. 38TH AVE. #150	
CITY-ST-ZIP	Wheat Ridge CO 80033	
TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jennifer Shaw	
STREET ADDRESS	7391 W. 38TH AVE. #150	
CITY-ST-ZIP	Wheat Ridge CO 80033	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SEE attached list	
STREET ADDRESS		
CITY-ST-ZIP		

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:

*Michael Larue*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/02

Date

303-467-8619

Daytime Phone #

CR2E034 (9/01)

Attachment 34831

#P95000033878

National Warranty of Florida, Inc. Officers and Directors (the 634 licensed company in Florida):

Daniel Haugen, President, Director

Michael La Rue, Executive VP, Treasurer, Secretary, Director

Jennifer Shaw, Vice President

Prizm Solutions, LLC. Officers and Directors (parent entity to National Warranty of Florida, Inc.):

Daniel Haugen, President, Director

Michael La Rue, Executive VP, Treasurer, Secretary, Director

Jennifer Shaw, Vice President

Dominic Sansone, Sr. VP Sales

Rick Villela, VP & Chief Technology Officer

Gregg Cariolano of Lyndon Insurance Group Inc., Director