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Jan 28 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000090550 (0)

1. Corporation Name

NA WARRANTY SERVICES OF FLORIDA, INC.

Principal Place of Business

Mailing Address

660 EAST JEFFERSON STREET
TALLAHASSEE FL 32301

660 EAST JEFFERSON STREET
TALLAHASSEE FL 32301-2582

3. Date Incorporated or Qualified
11/05/1996

3a. Date of Last Report
N/A

2. Principal Place of Business

21 2901 Butterfield Road

Suite, Apt. #, etc

22

City & State

23 Oak Brook, IL

Zip

24 60521

Country

25 USA

2a. Mailing Address

26 2901 Butterfield Road

Suite, Apt. #, etc

27

City & State

28 Oak Brook, IL

Zip

29 60521

Country

30 USA

4. FEI Number

☒ 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

MANG, DOUGLAS A ESQ.
660 EAST JEFFERSON STREET
TALLAHASSEE FL 32301

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

Signature typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | DELETE |
|-------|-------------------------|-----------------------|----------------------|--------------------------|
| D | FREEDLUND, ROGERS P JR. | 30 STIRRUP CUP COURT | ST. CHARLES IL 60174 | <input type="checkbox"/> |
| D | METTE, WILLIAM R JR. | 3751 N. MISSION HILLS | NORTHBROOK IL 60062 | <input type="checkbox"/> |
| D | CUCULICH, STEVEN A | 16304 MORADAS | TAMPA FL 33613 | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| 1.1 TITLE | 1.2 NAME | 1.3 STREET ADDRESS | 1.4 CITY-ST-ZIP | Change | Addition |
|-----------|---------------|-----------------------|-------------------------|-------------------------------------|-------------------------------------|
| P/D | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| S/T/D | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| V/D | | | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| V | Mark P. Cohen | 1154 Lincoln Ave. So. | Highland Park, IL 60035 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> |

14. I do 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 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:

WM R METTE, JR
TREASURER

1/17/97
TREASURER

(630) 990-7787
EXT 3265
7045613

CR2E034 (9/96)