2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # P96000101280 FILED CNA NATIONAL WARRANTY CORPORATION - FLORIDA 05 JUN 13 PM 2:51 SECRETARY OF STATE TALLAHASSEE, FLORIDA Principal Place of Business Mailing Address **CNA CENTER CNA CENTER** CHICAGO, IL 60685 115 STATE SPECIFIC, 28-S CHICAGO, IL 60685 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 06062005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 36-4124829 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD Street Address (P.O. Box Number is Not Acceptable) PLANTATION, FL 33324 City Zip Code FL 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Amended AR is \$61.25 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 CEOP TITLE Delete TITLE ☐ Change ☐ Addition SAUNDERS, JOAN B NAME NAME 600056505716 06/24/05--01027--004 **61 **CNA CENTER** STREET ADDRESS STREET ADDRESS **61.25 CHICAGO, IL 60685 CITY-ST-ZIP CITY-ST-ZIP AVP TITLE Delete ☐ Change TITLE Addition NAME SLIWA, JERRY F NAME STREET ADDRESS **CNA CENTER** STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60685 CITY-ST-ZIP VPT TITLE ☐ Defete TITLE ☐ Change ☐ Addition HEMME, DENNIS NAME NAME STREET ADDRESS **CNA CENTER** STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60685 CITY-ST-ZIP TITLE SVCE ☐ Delete TITLE ▼ Change SVP/CF0 ☐ Addition GRAY, SANDRA NAME NAME STREET ADDRESS **CNA CENTER** STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60685 CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Addition GROB, ROBERT J NAME NAME STREET ADDRESS **CNA CENTER** STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60685 CITY-ST-ZIP TITLE AVP AVP/S Delete TITLE Change ☐ Addition RIBIKAWSKIS, MARY A. NAME NAME STREET ADDRESS **CNA CENTER** STREET ADDRESS CITY-ST-ZIP CHICAGO, IL 60685 CITY-ST-ZIP 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. Jerry F. Sliwa, Asst. Vice President 06/06/05 312 822-7191 Date Daytime Phone

Current Officers & Directors

CNA National Warranty Corporation-Florida

DirectorTitleJoey H. BeckerDirectorJoan B. SaundersDirectorPeter W. WilsonDirector

Officer <u>Title</u>

Joey H. Becker Chief Operating Officer & Assistant Secretary

Joan B. Saunders Chief Executive Officer & President

Sandra Gray Senior Vice President & Chief Financial Officer

Robert Ricky Jones Senior Vice President
Dennis R. Hemme Vice President & Treasurer
Robert J. Grob Assistant Vice President

Mary A. Ribikawskis Assistant Vice President & Secretary

Jerry F. Sliwa Assistant Vice President
David Lehman Assistant Secretary

Address for all the above Officers and Directors:

CNA Center 333 S. Wabash Ave. (60604) Chicago, IL 60685