

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000091273

Entity Name: 4WARRANTY CORPORATION**Current Principal Place of Business:**10751 DEERWOOD PARK BLVD
SUITE 200
JACKSONVILLE, FL 32256**Current Mailing Address:**10751 DEERWOOD PARK BLVD
SUITE 200
JACKSONVILLE, FL 32256 US**FEI Number:** 59-3675673**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title CHAIRMAN, PRESIDENT, CEO & DIRECTOR
Name VARA, SANJAY S
Address 10751 DEERWOOD PARK BLVD
SUITE 200
City-State-Zip: JACKSONVILLE FL 32256

Title TREASURER
Name VRBAN, MICHAEL
Address 10751 DEERWOOD PARK BLVD.
SUITE 200
City-State-Zip: JACKSONVILLE FL 32256

Title VP
Name WOOD, STEVEN R
Address 10751 DEERWOOD PARK BLVD.
SUITE 200
City-State-Zip: JACKSONVILLE FL 32256

Title CFO, DIRECTOR
Name GRASHER, MICHAEL F.
Address 10751 DEERWOOD PARK BLVD.
SUITE 200
City-State-Zip: JACKSONVILLE FL 32256

Title SECRETARY, DIRECTOR
Name ROMAINE, CHRISTOPHER D
Address 10751 DEERWOOD PARK BLVD.
SUITE 200
City-State-Zip: JACKSONVILLE FL 32256

I hereby 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 all other like empowered.

SIGNATURE: SANJAY VARA**PRESIDENT****01/24/2022**_____
Electronic Signature of Signing Officer/Director Detail_____
Date