

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000042492

**Entity Name:** CNA WARRANTY SERVICES OF FLORIDA, INC.**Current Principal Place of Business:**333 SOUTH WABASH  
CHICAGO, IL 60604**Current Mailing Address:**333 SOUTH WABASH  
43RD FLOOR  
CHICAGO, IL 60604 US**FEI Number:** 35-2477734**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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 PRES & DIRECTOR  
Name LOEBACH, BRAIN J  
Address 333 SOUTH WABASH  
City-State-Zip: CHICAGO IL 60604

Title VP, DIRECTOR  
Name EHLERS, RICHARD C JR  
Address 333 SOUTH WABASH  
City-State-Zip: CHICAGO IL 60604

Title VP & ASST. TREASURER  
Name URBON, TODD R  
Address 333 SOUTH WABASH  
City-State-Zip: CHICAGO IL 60604

Title AVP  
Name GROB, ROBERT J  
Address 333 SOUTH WABASH  
City-State-Zip: CHICAGO IL 60604

Title AVP  
Name WARD, CHRISTOPHER S  
Address 333 SOUTH WABASH  
City-State-Zip: CHICAGO IL 60604

Title VP  
Name MILLS, PAUL W  
Address 333 SOUTH WABASH  
City-State-Zip: CHICAGO IL 60604

Title SECRETARY & AVP  
Name RIBIKAWSKIS, MARY A.  
Address 333 SOUTH WABASH  
City-State-Zip: CHICAGO IL 60604

Title ASST. SECRETARY  
Name LEHMAN, DAVID B  
Address 333 SOUTH WABASH  
City-State-Zip: CHICAGO IL 60604

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*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:** MARY A. RIBIKAWSKIS**SECRETARY & AVP****07/09/2014**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	HERMAN, MARK I
Address	333 SOUTH WABASH
City-State-Zip:	CHICAGO IL 60604