

2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000004552

Entity Name: CENTURY WARRANTY SERVICES, INC.**Current Principal Place of Business:**8019 BAYBERRY ROAD
JACKSONVILLE, FL 32256**Current Mailing Address:**8019 BAYBERRY ROAD
JACKSONVILLE, FL 32256 US**FEI Number:** 03-0482615**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED AGENT GROUP INC.
801 US HWY 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** GROUP VICE PRESIDENT, CHIEF
FINANCIAL OFFICER AND ASSISTANT
TREASURER / DIRECTOR**Name** D. PRITCHARD, MICHAEL**Address** 8019 BAYBERRY ROAD**City-State-Zip:** JACKSONVILLE FL 32256**Title** DIRECTOR / GROUP VICE PRESIDENT**Name** GUNNELL, SCOTT**Address** 8019 BAYBERRY ROAD**City-State-Zip:** JACKSONVILLE FL 32256**Title** VP, CORPORATE TAXES**Name** M. MAGNER, KIMBERLY**Address** 8019 BAYBERRY ROAD**City-State-Zip:** JACKSONVILLE FL 32256**Title** ASSISTANT SECRETARY**Name** E. FOSTER, DANA**Address** 8019 BAYBERRY ROAD**City-State-Zip:** JACKSONVILLE FL 32256**Title** PRESIDENT**Name** CHAIT, DANIEL**Address** 8019 BAYBERRY ROAD**City-State-Zip:** JACKSONVILLE FL 32256**Title** VP, GENERAL COUNSEL AND
SECRETARY**Name** K GUTTUSO, MARIA**Address** 8019 BAYBERRY ROAD**City-State-Zip:** JACKSONVILLE FL 32256**Title** TREASURER**Name** M. GEBHARD, ERIC**Address** 8019 BAYBERRY ROAD**City-State-Zip:** JACKSONVILLE FL 32256**Title** ASSISTANT SECRETARY**Name** WILLIAMS, CAREN**Address** 8019 BAYBERRY ROAD**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: CAREN WILLIAMSASSISTANT SECRETARY, 04/14/2022
BY JON-MICHAEL
SANCHEZ ATTORNEY-IN-
FACT

Electronic Signature of Signing Officer/Director Detail

Date