

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000137603

Entity Name: SAFE-GUARD WARRANTY CORPORATION**Current Principal Place of Business:**TWO CONCOURSE PARKWAY
SUITE 500
ATLANTA, GA 30328**Current Mailing Address:**TWO CONCOURSE PARKWAY
SUITE 500
ATLANTA, GA 30328 US**FEI Number:** 20-0588038**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 | TREASURER |
| Name | KOENIG, JEFFREY H. |
| Address | TWO CONCOURSE PARKWAY SUITE 500 |
| City-State-Zip: | ATLANTA GA 30328 |

| | |
|-----------------|------------------------------------|
| Title | SECRETARY |
| Name | WIENER, DAMON A. |
| Address | TWO CONCOURSE PARKWAY SUITE 500 |
| City-State-Zip: | ATLANTA GA 30328 |

| | |
|-----------------|------------------------------------|
| Title | DIRECTOR |
| Name | DUNCAN, DAVID A. |
| Address | TWO CONCOURSE PARKWAY SUITE 500 |
| City-State-Zip: | ATLANTA GA 30328 |

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|-----------------|------------------------------------|
| Title | PRESIDENT |
| Name | DUNCAN, DAVID A. |
| Address | TWO CONCOURSE PARKWAY SUITE 500 |
| City-State-Zip: | ATLANTA GA 30328 |

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: DAVID A. DUNCAN**PRESIDENT****01/24/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date