

No. <b>C 197470</b>		<b>Due no later than Feb 28, 2017</b> <b>Annual Report Form</b>		2. Registered Agent and Address ( <b>NO PO BOX</b> )			
Return to:  SECRETARY OF STATE 700 WEST JEFFERSON PO BOX 83720 BOISE, ID 83720-0080  <b>NO FILING FEE IF RECEIVED BY DUE DATE</b>		<b>1. Mailing Address: Correct in this box if needed.</b>  CNA NATIONAL WARRANTY CORPORATION 333 S. WABASH AVE. 43RD FLOOR CHICAGO IL 60604		C T CORPORATION SYSTEM 921 S ORCHARD ST STE G BOISE ID 83705			
						3. <u>New</u> Registered Agent Signature:*	
4. Corporations: Enter Names and Business Addresses of President, Secretary, and Directors, Treasurer (optional).							
Office Held	Name	Street or PO Address	City	State	Country	Postal Code	
DIRECTOR	DONALD OLIVER	4150 N. DRINKWATER BLVD. STE. 400	SCOTTSDALE	AZ	USA	85251	
DIRECTOR	JOHN LOUGHIN	4150 N. DRINKWATER BLVD. STE. 400	SCOTTSDALE	AZ	USA	85251	
DIRECTOR	BRIAN J. LOEBACH	333 S. WABASH AVE	CHICAGO	IL	USA	60604	
PRESIDENT	JOEY H BECKER	4150 N DRINKWATER BLVD STE 400 STE. 400	SCOTTSDALE	AZ	USA	85251	
SECRETARY	KATHLEEN SULIKOWSKI	333 S. WABASH AVE.	CHICAGO	IL	USA	60604	
TREASURER	AMY C. ADAMS	333 S. WABASH AVE.	CHICAGO	IL	USA	60604	
DIRECTOR	JOEY H. BECKER	4150 N. DRINKWATER BLVD. STE. 400	SCOTTSDALE	AZ	USA	85251	
5. Organized Under the Laws of:  <b>AZ</b> <b>C 197470</b>		6. Annual Report must be signed.*  Signature: KATHLEEN SULIKOWSKI Name (type or print): KATHLEEN SULIKOWSKI					
		Date: 02/06/2017 Title: SECRETARY					
Processed 02/06/2017      * Electronically provided signatures are accepted as original signatures.							