

IN THE CIRCUIT COURT OF THE  
SECOND JUDICIAL CIRCUIT, IN  
AND FOR LEON COUNTY, FLORIDA

IN RE: The Receivership of SENSIBLE  
HOME WARRANTY, LLC, a Nevada  
corporation.

CASE NO.: 2015-CA-0273

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**ANCILLARY RECEIVER'S MOTION FOR APPROVAL OF  
FINAL CLAIMS REPORT, CLAIMS DISTRIBUTION REPORT,  
DISTRIBUTION ACCOUNTING, AND FOR ORDER AUTHORIZING DISTRIBUTION**

The Florida Department of Financial Services, as Ancillary Receiver of Sensible Home Warranty, LLC, (hereinafter "Ancillary Receiver" or "Department"), by and through its undersigned counsel, hereby files this Motion for Approval of Final Claims Report, Claims Distribution Report, Distribution Accounting, and for Order Authorizing Distribution, and as grounds therefore states the following:

1. Sensible Home Warranty, LLC ("Sensible") was a foreign insurer domiciled in Nevada to transact the business of insurance in the State of Florida.
2. On September 24, 2014, the State of Nevada Commissioner of Insurance issued an Order Setting Liquidation Procedures ("Nevada Order").
3. On February 19, 2015, this Court entered an Order Appointing the Florida Department of Financial Services as Ancillary Receiver and Notice of Automatic Stay ("Ancillary Order").
4. This Court has jurisdiction over the Sensible receivership and is authorized to enter all necessary and/or proper orders to carry out the purpose of the Florida Insurers Rehabilitation and Liquidation Act, Section 631.021(1), Florida Statutes.

5. The Court approved the Ancillary Receiver's First Interim Claims Report in the Order Approving Ancillary Receiver's First Interim Claims Report and Recommendation on Claims entered December 9, 2015.

6. The Ancillary Receiver has compiled a Final Claims Report dated March 10, 2016, which reflects the classification of all filed claims in Classes 2-11 by priority in accordance with Section 631.271, Florida Statutes, and the claims filing deadline. This report also incorporates the resolution of all timely filed objections and claimant information updates. The Final Claims Report is attached hereto and incorporated herein by reference as Exhibit "A."

7. Sensible was a home warranty company domiciled in Nevada. There is no guaranty association involved with the Sensible estate. Since there is no guaranty association involvement in the estate, the Final Claims Report consists only of claims of non-guaranty association claims.

8. The Final Claims Report shows the gross number of non-guaranty association claims is 843 for a total amount claimed of \$82,086.12. The total amount recommended by the Ancillary Receiver is \$142,238.58.

9. Specifically with regard to Class 2, the Final Claims Report shows the number of claims is 659 for a total amount claimed of \$17,874.61. The total amount recommended for Class 2 claims by the Ancillary Receiver is \$96,833.08. For the Court's convenience, a copy of the summary totals from the Final Claims Report is attached hereto as Exhibit "B."

10. With the approval of the Receiver's Final Claims Report, the Ancillary Receiver is now in a position to make a distribution of receivership assets. Said assets will be distributed to claimants in Class 2 in accordance with the Claims Distribution Report dated March 10, 2016. For the Court's convenience, a paper copy of the summary totals from the Claims Distribution Report is attached as Exhibit "C." The full text of the Claims Distribution Report will be provided upon the request of the Court.

11. The Ancillary Receiver has compiled a Distribution Accounting Statement projection (the "Distribution Accounting"). As shown in the Distribution Accounting, the Receiver is prepared to make a distribution of \$14,904.31 to all claimants in Class 2. Ultimately, this distribution constitutes 15.3918% of the amount recommended in Class 2. The final pro-rata calculation and the amount distributed may have a slight variance due to rounding at the time of check processing. The Distribution Accounting is attached hereto and incorporated herein by reference as Exhibit "D."

12. Despite the Ancillary Receiver's best efforts, some approved claims may have inadequate current address information and/or may have not provided the Ancillary Receiver with a form W-9, required by the Internal Revenue Service. The distribution amounts that go unclaimed and/or the checks for the claimants that are returned to the Receiver will be verified in an unclaimed property report. The Ancillary Receiver asks the Court for approval to forward the unclaimed funds to the Unclaimed Property Bureau of the Florida Department of Financial Services.

13. The Ancillary Receiver recommends that the Final Claims Report, Claims Distribution Report, and Distribution Accounting be approved.

**WHEREFORE**, the Receiver requests this Court grant its Motion and enter an Order Approving and adopting the Final Claims Report, Claims Distribution Report, Distribution Accounting, authorizing distribution, and approving that any unclaimed distribution amounts be transferred to the Unclaimed Property Bureau of the Florida Department of Financial Services.

RESPECTFULLY SUBMITTED on this 29 day of March, 2016.

/s/Conor J. McLaughlin

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CONOR J. MCLAUGHLIN

Florida Bar No. 0084477

Senior Attorney

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Department of Financial Services

Division of Rehabilitation and Liquidation

2020 Capital Circle Southeast, Suite 310

Tallahassee, Florida 32301

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1001-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW102784 <b>CLAIM NUMBER :</b> 1001 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JIAN ZHONG <b>CLAIMANT :</b> JIAN ZHONG  611 SAMUEL ST DAVENPORT,FL 338976221	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1002-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW103361 <b>CLAIM NUMBER :</b> 1002 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RACHEL SPEAR <b>CLAIMANT :</b> RACHEL SPEAR  4440 NW 49TH ST APT 103 GAINESVILLE,FL 326067659	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1003-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW104298 <b>CLAIM NUMBER :</b> 1003 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MEGHAN LEWIS <b>CLAIMANT :</b> MEGHAN LEWIS  1464 GOODWOOD CT TALLAHASSEE,FL 323084652	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1004-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW104792 <b>CLAIM NUMBER :</b> 1004 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARIE EPSTEIN <b>CLAIMANT :</b> MARIE EPSTEIN  200 LAKE REGION BLVD S WINTER HAVEN,FL 33881	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1005-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW122166 <b>CLAIM NUMBER :</b> 1005 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHRISTOPHER RICE <b>CLAIMANT :</b> CHRISTOPHER RICE  12385 HAGAN CREEK DR JACKSONVILLE,FL 322188319	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1006-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW122271 <b>CLAIM NUMBER :</b> 1006 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JESSICA RODRIGUEZ <b>CLAIMANT :</b> JESSICA RODRIGUEZ  516 NW 23RD AVE FT LAUDERDALE,FL 333117724	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1007-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW122272 <b>CLAIM NUMBER :</b> 1007 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JO ANN DEMAG <b>CLAIMANT :</b> JO ANN DEMAG 2330 THOREAU DR LAKE WALES,FL 338986681	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1008-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW122812 <b>CLAIM NUMBER :</b> 1008 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SERGEY TONAKANYAN <b>CLAIMANT :</b> SERGEY TONAKANYAN 9918 MOORINGS DR JACKSONVILLE,FL 322577591	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1009-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123261 <b>CLAIM NUMBER :</b> 1009 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JILL FALTZ <b>CLAIMANT :</b> JILL FALTZ 2211 EISENHOWER DR APT 101 DUNEDIN,FL 346985600	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1010-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123301 <b>CLAIM NUMBER :</b> 1010 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> NANCY ARISTIMUNO <b>CLAIMANT :</b> NANCY ARISTIMUNO 1035 ANCHOR RD SAINT JOHNS,FL 322599024	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1011-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123335 <b>CLAIM NUMBER :</b> 1011 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHANEL FIELDER <b>CLAIMANT :</b> CHANEL FIELDER 11710 LAKE BUTLER BLVD WINDERMERE,FL 347867817	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1012-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123401 <b>CLAIM NUMBER :</b> 1012 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SUE JIANG <b>CLAIMANT :</b> SUE JIANG 2538 ALBACA DR ORLANDO,FL 328378519	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

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 SENSIBLE HOME WARRANTY, LLC  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1013-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123921 <b>CLAIM NUMBER :</b> 1013 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MANUEL LOPEZ TORRES <b>CLAIMANT :</b> MANUEL LOPEZ TORRES  12293 COCONUT GROVE CT JACKSONVILLE,FL 322188669	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1014-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123997 <b>CLAIM NUMBER :</b> 1014 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RICHARD YDOYAGA <b>CLAIMANT :</b> RICHARD YDOYAGA  14181 NESTING WAY APT D DELRAY BEACH,FL 334842697	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1015-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW124002 <b>CLAIM NUMBER :</b> 1015 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MICHAEL HARTMAN <b>CLAIMANT :</b> MICHAEL HARTMAN  220 DIAMOND CV DESTIN,FL 325413669	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1016-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW124400 <b>CLAIM NUMBER :</b> 1016 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MATTHEW PERRY <b>CLAIMANT :</b> MATTHEW PERRY  2938 CURVING OAKS WAY ORLANDO,FL 32820	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1017-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW124432 <b>CLAIM NUMBER :</b> 1017 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MATTHEW PERRY <b>CLAIMANT :</b> MATTHEW PERRY  2938 CURVING OAKS WAY ORLANDO,FL 32820	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1018-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW124433 <b>CLAIM NUMBER :</b> 1018 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MATTHEW PERRY <b>CLAIMANT :</b> MATTHEW PERRY  2938 CURVING OAKS WAY ORLANDO,FL 32820	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

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<b>COMPANY:</b> 547 <b>ID NO :</b> 1019-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW124629 <b>CLAIM NUMBER :</b> 1019 <b>INS/CLMT STATE :</b> NV <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ADAM BEARDEN <b>CLAIMANT :</b> ADAM BEARDEN  4725 STAFFORD DR LAS VEGAS,NV 891152371	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1020-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW125265 <b>CLAIM NUMBER :</b> 1020 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MATTEW SCOTT <b>CLAIMANT :</b> MATTEW SCOTT  5040 PALMER AVE JACKSONVILLE,FL 322103245	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1021-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW125300 <b>CLAIM NUMBER :</b> 1021 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BRENDA STALLCUP <b>CLAIMANT :</b> BRENDA STALLCUP  1153 BRAFFORTON DR TALLAHASSEE,FL 32301	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1022-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW125523 <b>CLAIM NUMBER :</b> 1022 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LISETTE FERNANDEZ <b>CLAIMANT :</b> LISETTE FERNANDEZ  17744 AYRSHIRE BLVD LAND O LAKES,FL 346387977	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1023-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW125874 <b>CLAIM NUMBER :</b> 1023 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SHENGHONG CHEN <b>CLAIMANT :</b> SHENGHONG CHEN  2517 LACERTA DR ORLANDO,FL 328289330	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1024-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW126051 <b>CLAIM NUMBER :</b> 1024 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> REBECCA SHIFFLET <b>CLAIMANT :</b> REBECCA SHIFFLET  1704 CALVADOS DR COCOA,FL 329265781	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

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<b>COMPANY:</b> 547 <b>ID NO :</b> 1025-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW126437 <b>CLAIM NUMBER :</b> 1025 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LIRON OFFIR <b>CLAIMANT :</b> LIRON OFFIR  5200 NW 99TH AVE SUNRISE,FL 333514756	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1026-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127508 <b>CLAIM NUMBER :</b> 1026 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOE MASEDA <b>CLAIMANT :</b> JOE MASEDA  5518 LIBERTY PLAIN CIR TAMPA,FL 336115623	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1027-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127555 <b>CLAIM NUMBER :</b> 1027 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JEFFREY ROLLAND <b>CLAIMANT :</b> JEFFREY ROLLAND  1805 TWELVE OAKS LN N NEPTUNE BEACH,FL 322663181	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1028-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127603 <b>CLAIM NUMBER :</b> 1028 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOE MASEDA <b>CLAIMANT :</b> JOE MASEDA  9246 RIVER ROCK LN RIVERVIEW,FL 335785411	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1029-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127604 <b>CLAIM NUMBER :</b> 1029 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOE MASEDA <b>CLAIMANT :</b> JOE MASEDA  536 ROYAL RIDGE ST VALRICO,FL 335944049	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1030-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127649 <b>CLAIM NUMBER :</b> 1030 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MING LEE <b>CLAIMANT :</b> MING LEE  9442 NORTHCLIFFE BLVD SPRING HILL,FL 346061553	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1031-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127720 <b>CLAIM NUMBER :</b> 1031 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TAMMY SPRENKLE <b>CLAIMANT :</b> TAMMY SPRENKLE 5662 OLDE QUEENS CT SAINT CLOUD,FL 347727042	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1032-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127727 <b>CLAIM NUMBER :</b> 1032 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BARBARA TAGERT <b>CLAIMANT :</b> BARBARA TAGERT 4760 NW 80TH AVE OCALA,FL 344822032	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1033-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127765 <b>CLAIM NUMBER :</b> 1033 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> GENE HESS <b>CLAIMANT :</b> GENE HESS 1507 LAKE BALDWIN LN ORLANDO,FL 328146692	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1034-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127913 <b>CLAIM NUMBER :</b> 1034 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DORIS CAIN <b>CLAIMANT :</b> DORIS CAIN 2521 ONEIDA LOOP KISSIMMEE,FL 347472792	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1035-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW128027 <b>CLAIM NUMBER :</b> 1035 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RICHARD J & LAURA J SZAROWICZ <b>CLAIMANT :</b> RICHARD J & LAURA J SZAROWICZ 2206 COMMON LOON DR LAKELAND,FL 338102386	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1036-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW128473 <b>CLAIM NUMBER :</b> 1036 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BHAGIRATH PATEL <b>CLAIMANT :</b> BHAGIRATH PATEL 11725 CARROLLWOOD COVE DR TAMPA,FL 336244534	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1037-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW128823 <b>CLAIM NUMBER :</b> 1037 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> HAROLD AND CAROL A CARNLEY <b>CLAIMANT :</b> HAROLD AND CAROL A CARNLEY  222 RIVERCHASE BLVD CRESTVIEW,FL 325364229	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1038-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129045 <b>CLAIM NUMBER :</b> 1038 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ROBERT HOGAN <b>CLAIMANT :</b> ROBERT HOGAN  6001 BLAIR CIR GULF BREEZE,FL 325637064	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1039-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129163 <b>CLAIM NUMBER :</b> 1039 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ED PREHER <b>CLAIMANT :</b> ED PREHER  5380 HYLAND HILLS AVE SARASOTA,FL 342417191	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1040-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129269 <b>CLAIM NUMBER :</b> 1040 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> KENNETH RANDALL <b>CLAIMANT :</b> KENNETH RANDALL  29772 SW 164TH CT HOMESTEAD,FL 330333295	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1041-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129284 <b>CLAIM NUMBER :</b> 1041 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RICKY SCHUELLER <b>CLAIMANT :</b> RICKY SCHUELLER  1258 EASTWOOD DR LUTZ,FL 335494189	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1042-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129371 <b>CLAIM NUMBER :</b> 1042 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TAMARA FREEMAN <b>CLAIMANT :</b> TAMARA FREEMAN  668 CORNWALLIS DR DAVENPORT,FL 338978044	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

## EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1043-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129372 <b>CLAIM NUMBER :</b> 1043 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TAMARA FREEMAN <b>CLAIMANT :</b> TAMARA FREEMAN 320 ASTER DR DAVENPORT,FL 338973810	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1044-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129500 <b>CLAIM NUMBER :</b> 1044 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DOROTHY JUDSON <b>CLAIMANT :</b> DOROTHY JUDSON 5820 AUDUBON MANOR BLVD LITHIA,FL 335475005	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1045-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129521 <b>CLAIM NUMBER :</b> 1045 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DOROTHY MARSHALL <b>CLAIMANT :</b> DOROTHY MARSHALL 105 OLD PONTE VEDRA DR PONTE VEDRA BEACH,FL 320824416	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1046-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129577 <b>CLAIM NUMBER :</b> 1046 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RONALD SALATEO <b>CLAIMANT :</b> RONALD SALATEO 105 OLD PONTE VEDRA DR PONTE VEDRA BEACH,FL 320824416	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1047-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129652 <b>CLAIM NUMBER :</b> 1047 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JAN ECKERT <b>CLAIMANT :</b> JAN ECKERT 4310 BURLINGTON AVE N ST PETERSBURG,FL 337137326	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1048-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW130254 <b>CLAIM NUMBER :</b> 1048 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TOMMY ALFORD <b>CLAIMANT :</b> TOMMY ALFORD 3237 WOODGLEN DR ORANGE PARK,FL 320656683	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1049-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW130357 <b>CLAIM NUMBER :</b> 1049 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHARLES SCOTT <b>CLAIMANT :</b> CHARLES SCOTT  1415 SUN MARSH DR JACKSONVILLE,FL 322255833	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1050-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW130372 <b>CLAIM NUMBER :</b> 1050 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BEN TISSER <b>CLAIMANT :</b> BEN TISSER  6530 VIA ROSA BOCA RATON,FL 334336465	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1051-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW130465 <b>CLAIM NUMBER :</b> 1051 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DANIEL JACOBS <b>CLAIMANT :</b> DANIEL JACOBS  20940 CALLE CRISTAL LN UNIT 1 NORTH FORT MYERS,FL 339178105	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1052-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW130995 <b>CLAIM NUMBER :</b> 1052 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JAMES TAYLOR <b>CLAIMANT :</b> JAMES TAYLOR  13601 PINE MEADOW CT DAVIE,FL 333255101	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1053-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW131154 <b>CLAIM NUMBER :</b> 1053 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DWAYNE CLUTTER <b>CLAIMANT :</b> DWAYNE CLUTTER  123 BRIARGATE LOOK ORMOND BEACH,FL 321740728	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$705.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$705.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1054-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW131514 <b>CLAIM NUMBER :</b> 1054 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ERIKA PICARD <b>CLAIMANT :</b> ERIKA PICARD  851 VILLAGE WAY PALM HARBOR,FL 346832940	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1055-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW131974 <b>CLAIM NUMBER :</b> 1055 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MATTHEW HOLSOPPLE <b>CLAIMANT :</b> MATTHEW HOLSOPPLE  25812 HARTACK DR WESLEY CHAPEL,FL 335445547	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1056-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW131984 <b>CLAIM NUMBER :</b> 1056 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DEVIN WALKER <b>CLAIMANT :</b> DEVIN WALKER  2617 NEUCHATEL DR TALLAHASSEE,FL 323032249	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$571.47 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$571.47
<b>COMPANY:</b> 547 <b>ID NO :</b> 1057-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132017 <b>CLAIM NUMBER :</b> 1057 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ALEXANDRE GRASAS <b>CLAIMANT :</b> ALEXANDRE GRASAS  2735 SW 35TH PL GAINESVILLE,FL 326083293	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1058-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132231 <b>CLAIM NUMBER :</b> 1058 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> KULSUM BHIMANI <b>CLAIMANT :</b> KULSUM BHIMANI  1155 KERSFIELD CIR LAKE MARY,FL 327461933	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1059-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132237 <b>CLAIM NUMBER :</b> 1059 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DAWN FACKLER <b>CLAIMANT :</b> DAWN FACKLER  10800 SW 67TH TER OCALA,FL 344764763	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1060-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132417 <b>CLAIM NUMBER :</b> 1060 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOSE ESTRADA <b>CLAIMANT :</b> JOSE ESTRADA  11475 CARDINAL WAY LARGO,FL 337743915	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1061-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132573 <b>CLAIM NUMBER :</b> 1061 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> FRANCIS KELLY <b>CLAIMANT :</b> FRANCIS KELLY  3676 LETITIA LN TALLAHASSEE,FL	323121031	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1062-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132574 <b>CLAIM NUMBER :</b> 1062 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> FRANCIS KELLY <b>CLAIMANT :</b> FRANCIS KELLY  813 JAMESTOWN CT TALLAHASSEE,FL	323035742	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1063-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132644 <b>CLAIM NUMBER :</b> 1063 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> YANIV OFFIR <b>CLAIMANT :</b> YANIV OFFIR  3601 N 33RD TER HOLLYWOOD,FL	330212503	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1064-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132718 <b>CLAIM NUMBER :</b> 1064 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOHN TINGLE <b>CLAIMANT :</b> JOHN TINGLE  12630 175TH RD N JUPITER,FL	334784620	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1065-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132758 <b>CLAIM NUMBER :</b> 1065 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> GARY JOURA <b>CLAIMANT :</b> GARY JOURA  320 SEA ISLAND WAY TAMPA,FL	336025960	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1066-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132783 <b>CLAIM NUMBER :</b> 1066 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JENNY WILSON <b>CLAIMANT :</b> JENNY WILSON  11423 BELLE HAVEN DR NEW PORT RICHEY,FL	346544435	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1067-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133005 <b>CLAIM NUMBER :</b> 1067 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> HAI KIEU <b>CLAIMANT :</b> HAI KIEU  1108 DARNABY WAY ORLANDO,FL 328245074	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1068-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133073 <b>CLAIM NUMBER :</b> 1068 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ROD LUBASKI <b>CLAIMANT :</b> ROD LUBASKI  3715 SAN SIMEON CIR WESTON,FL 333315048	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1069-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133074 <b>CLAIM NUMBER :</b> 1069 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ROD LUBASKI <b>CLAIMANT :</b> ROD LUBASKI  177 E BAYRIDGE DR WESTON,FL 333263530	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1070-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133167 <b>CLAIM NUMBER :</b> 1070 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ADAM BADT <b>CLAIMANT :</b> ADAM BADT  5557 BRISTOL BAY LN N JACKSONVILLE,FL 322446928	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1071-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133415 <b>CLAIM NUMBER :</b> 1071 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DAVID BORDEN <b>CLAIMANT :</b> DAVID BORDEN  1730 SAGECREST CT THE VILLAGES,FL 321623225	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1072-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133622 <b>CLAIM NUMBER :</b> 1072 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ELIZABETH JONES <b>CLAIMANT :</b> ELIZABETH JONES  112 SIMPSON DR INTERLACHEN,FL 321484222	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A



FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1073-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133694 <b>CLAIM NUMBER :</b> 1073 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> HOWARD LEIBOWITZ <b>CLAIMANT :</b> HOWARD LEIBOWITZ  2528 HUNTERS RUN WAY WESTON,FL 333271437	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1074-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133802 <b>CLAIM NUMBER :</b> 1074 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CEDRIC DAWKINS <b>CLAIMANT :</b> CEDRIC DAWKINS  10025 DORIATH CIR ORLANDO,FL 328259101	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1075-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133844 <b>CLAIM NUMBER :</b> 1075 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DAVID BARRY <b>CLAIMANT :</b> DAVID BARRY  913 S BRUCE ST TAMPA,FL 336062813	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1076-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133851 <b>CLAIM NUMBER :</b> 1076 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARY ORR <b>CLAIMANT :</b> MARY ORR  3773 WINDING LAKE CIR ORLANDO,FL 328352667	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1077-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133852 <b>CLAIM NUMBER :</b> 1077 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARY ORR <b>CLAIMANT :</b> MARY ORR  504 SYCAMORE ST KISSIMMEE,FL 347474671	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1078-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133853 <b>CLAIM NUMBER :</b> 1078 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARY ORR <b>CLAIMANT :</b> MARY ORR  4631 S ATLANTIC AVE PORT ORANGE,FL 321278050	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW133862	<b>INSURED :</b> VILMA WALKER	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1079-1	<b>CLAIM NUMBER :</b> 1079	<b>CLAIMANT :</b> VILMA WALKER	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	13321 FOX GLOVE ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WINTER GARDEN,FL		
		347874714		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW133867	<b>INSURED :</b> VILMA WALKER	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1080-1	<b>CLAIM NUMBER :</b> 1080	<b>CLAIMANT :</b> VILMA WALKER	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1168 HAWKSLADE CT	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WINTER GARDEN,FL		
		347874731		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW133873	<b>INSURED :</b> SOURAYA SARRIEDINE	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1081-1	<b>CLAIM NUMBER :</b> 1081	<b>CLAIMANT :</b> SOURAYA SARRIEDINE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1570 CHESTNUT AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WINTER PARK,FL		
		327891606		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW134412	<b>INSURED :</b> BILL LIMATO	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1082-1	<b>CLAIM NUMBER :</b> 1082	<b>CLAIMANT :</b> BILL LIMATO	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	225 RANIER CV APT 101	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	CASSELBERRY,FL		
		327076839		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW134598	<b>INSURED :</b> JERRY ROCCO	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1083-1	<b>CLAIM NUMBER :</b> 1083	<b>CLAIMANT :</b> JERRY ROCCO	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	65 HERON DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PALM COAST,FL		
		321371313		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW134688	<b>INSURED :</b> CHANEL FIELDER	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1084-1	<b>CLAIM NUMBER :</b> 1084	<b>CLAIMANT :</b> CHANEL FIELDER	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	14118 MAGNOLIA GLEN CIR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL		
		328288379		

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1085-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135042 <b>CLAIM NUMBER :</b> 1085 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOHN LATIOLAIS <b>CLAIMANT :</b> JOHN LATIOLAIS  11620 E BAY RD GIBSONTON,FL 335345620	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1086-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135140 <b>CLAIM NUMBER :</b> 1086 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RENARD LARUSSI <b>CLAIMANT :</b> RENARD LARUSSI  5200 N FLAGLER DR WEST PALM BEACH,FL 334072755	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1087-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135141 <b>CLAIM NUMBER :</b> 1087 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RENARD LARUSSI <b>CLAIMANT :</b> RENARD LARUSSI  1850 S OCEAN DR HALLANDALE BEACH,FL 330097675	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1088-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135146 <b>CLAIM NUMBER :</b> 1088 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LAURIE TEGREENE <b>CLAIMANT :</b> LAURIE TEGREENE  466 W SHORE DR SUMMERLAND KEY,FL 330424429	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1089-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135184 <b>CLAIM NUMBER :</b> 1089 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHIN HSUN HSIEH <b>CLAIMANT :</b> CHIN HSUN HSIEH  838 CRYSTAL WAY ORANGE PARK,FL 320655554	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1090-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135249 <b>CLAIM NUMBER :</b> 1090 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CASSIO CAPPELOSSA <b>CLAIMANT :</b> CASSIO CAPPELOSSA  302 SE 3RD PL DANIA,FL 330044702	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1091-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135257 <b>CLAIM NUMBER :</b> 1091 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JENNIFER GALLAGHER <b>CLAIMANT :</b> JENNIFER GALLAGHER 632 ADRIANE PARK CIR KISSIMMEE,FL 347444900	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1092-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135296 <b>CLAIM NUMBER :</b> 1092 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> U K CUSTRED <b>CLAIMANT :</b> U K CUSTRED 5981 LAKE VICTORIA DR LAKELAND,FL 338134720	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1093-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135353 <b>CLAIM NUMBER :</b> 1093 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> GAIL ZALEV <b>CLAIMANT :</b> GAIL ZALEV 7146 VIA GENOVA DELRAY BEACH,FL 334463753	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$3,772.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$3,772.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1094-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135376 <b>CLAIM NUMBER :</b> 1094 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JAYANT RAJAGOPAL <b>CLAIMANT :</b> JAYANT RAJAGOPAL 242 CADIZ LOOP DAVENPORT,FL 338371402	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1095-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135377 <b>CLAIM NUMBER :</b> 1095 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JAYANT RAJAGOPAL <b>CLAIMANT :</b> JAYANT RAJAGOPAL 131 CADIZ LOOP DAVENPORT,FL 338371450	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1096-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135380 <b>CLAIM NUMBER :</b> 1096 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHRISTIAN SALNARS <b>CLAIMANT :</b> CHRISTIAN SALNARS 5880 COLLINS AVE MIAMI BEACH,FL 331402201	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

## EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135432	<b>INSURED :</b> ROBERT WOODARDS	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1097-1	<b>CLAIM NUMBER :</b> 1097	<b>CLAIMANT :</b> ROBERT WOODARDS	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	9355 HAWKS POINT DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322222819		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135444	<b>INSURED :</b> JOSEPH PELLETTIERE	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1098-1	<b>CLAIM NUMBER :</b> 1098	<b>CLAIMANT :</b> JOSEPH PELLETTIERE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	7801 MAPLEWOOD DR APT 905	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WEST MELBOURNE,FL 329041663		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135498	<b>INSURED :</b> CHERYL KOEGEL	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1099-1	<b>CLAIM NUMBER :</b> 1099	<b>CLAIMANT :</b> CHERYL KOEGEL	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3302 TALA LOOP	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LONGWOOD,FL 327793128		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135519	<b>INSURED :</b> LENNIE KRUK	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1100-1	<b>CLAIM NUMBER :</b> 1100	<b>CLAIMANT :</b> LENNIE KRUK	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3757 EAGLE HAMMOCK DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	SARASOTA,FL 342408239		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135889	<b>INSURED :</b> JAMES BAMFORD	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1101-1	<b>CLAIM NUMBER :</b> 1101	<b>CLAIMANT :</b> JAMES BAMFORD	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4830 ANDRADE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PENSACOLA,FL 325049020		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135927	<b>INSURED :</b> PAUL CHIN FONG	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1102-1	<b>CLAIM NUMBER :</b> 1102	<b>CLAIMANT :</b> PAUL CHIN FONG	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	17455 HUGH LN	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LAND O LAKES,FL 346387870		

## EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135942	<b>INSURED :</b> LENWORTH MATTHEWS	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1103-1	<b>CLAIM NUMBER :</b> 1103	<b>CLAIMANT :</b> LENWORTH MATTHEWS	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3857 ISLAND WAY	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ST PETERSBURG,FL 337056450		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135943	<b>INSURED :</b> LENWORTH MATTHEWS	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1104-1	<b>CLAIM NUMBER :</b> 1104	<b>CLAIMANT :</b> LENWORTH MATTHEWS	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2425 MIDDLETON GROVE DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	BRANDON,FL 335114777		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW136113	<b>INSURED :</b> CAHRLINE TAYLOR	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1105-1	<b>CLAIM NUMBER :</b> 1105	<b>CLAIMANT :</b> CAHRLINE TAYLOR	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2426 BURNS DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	MIDDLEBURG,FL 320686909		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW136230	<b>INSURED :</b> EDUARDO JAIMES	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1106-1	<b>CLAIM NUMBER :</b> 1106	<b>CLAIMANT :</b> EDUARDO JAIMES	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1590 DRUID RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	MAITLAND,FL 327514208		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW136261	<b>INSURED :</b> CHRIS WUESTENHOEFER	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1107-1	<b>CLAIM NUMBER :</b> 1107	<b>CLAIMANT :</b> CHRIS WUESTENHOEFER	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	655 ROCHESTER LOOP	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	DAVENPORT,FL 338978569		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW136458	<b>INSURED :</b> NEAL CAPLE	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1108-1	<b>CLAIM NUMBER :</b> 1108	<b>CLAIMANT :</b> NEAL CAPLE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	209 VISTORIA DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	NORTH PORT,FL 342872593		

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1109-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136575 <b>CLAIM NUMBER :</b> 1109 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> GREGORY VIDGOP <b>CLAIMANT :</b> GREGORY VIDGOP  1260 LAUREL CT WESTON,FL 333262838	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1110-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136577 <b>CLAIM NUMBER :</b> 1110 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ELIZABETH DIGIOVANNA <b>CLAIMANT :</b> ELIZABETH DIGIOVANNA  2287 SABASTIAN ST MOUNT DORA,FL 327578711	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1111-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136623 <b>CLAIM NUMBER :</b> 1111 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> HERMAN BROWN <b>CLAIMANT :</b> HERMAN BROWN  10862 SW 71ST CIR OCALA,FL 344765702	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1112-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136838 <b>CLAIM NUMBER :</b> 1112 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> PATRICIA CUNHA <b>CLAIMANT :</b> PATRICIA CUNHA  225 SE 3RD AVE MELROSE,FL 326665469	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1113-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136918 <b>CLAIM NUMBER :</b> 1113 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> FREDRICKA WAYMON <b>CLAIMANT :</b> FREDRICKA WAYMON  8016 RENAULT DR JACKSONVILLE,FL 322441326	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1114-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137042 <b>CLAIM NUMBER :</b> 1114 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RYAN RYEN <b>CLAIMANT :</b> RYAN RYEN  11540 TRUXTON CT JACKSONVILLE,FL 322231363	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1115-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137120 <b>CLAIM NUMBER :</b> 1115 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ANDREW SCHULTZ <b>CLAIMANT :</b> ANDREW SCHULTZ 12706 CASEY RD TAMPA,FL 336188502	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1116-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137358 <b>CLAIM NUMBER :</b> 1116 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHARLES MCDONALD <b>CLAIMANT :</b> CHARLES MCDONALD 57 PLEASANT HILL DR DEBARY,FL 327133292	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1117-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137359 <b>CLAIM NUMBER :</b> 1117 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHARLES MCDONALD <b>CLAIMANT :</b> CHARLES MCDONALD 2748 DELCREST DR ORLANDO,FL 328172668	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1118-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137360 <b>CLAIM NUMBER :</b> 1118 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHARLES MCDONALD <b>CLAIMANT :</b> CHARLES MCDONALD 7456 WOODBURN CT WINTER PARK,FL 327926571	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1119-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137530 <b>CLAIM NUMBER :</b> 1119 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BETTY GISSENDANNER <b>CLAIMANT :</b> BETTY GISSENDANNER 23259 PAINTER AVE PORT CHARLOTTE,FL 339543645	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1120-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137731 <b>CLAIM NUMBER :</b> 1120 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TONI BROWN <b>CLAIMANT :</b> TONI BROWN 15732 SW 41ST ST MIRAMAR,FL 330274812	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A



FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1121-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137732 <b>CLAIM NUMBER :</b> 1121 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TONI BROWN <b>CLAIMANT :</b> TONI BROWN 318 NE 7TH AVE FORT LAUDERDALE,FL 333011600	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1122-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137752 <b>CLAIM NUMBER :</b> 1122 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JENNIFER YOUNG <b>CLAIMANT :</b> JENNIFER YOUNG 2010 E PALM AVE TAMPA,FL 336053932	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1123-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137816 <b>CLAIM NUMBER :</b> 1123 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DAN FRYER <b>CLAIMANT :</b> DAN FRYER 4611 CARDINAL BLVD JACKSONVILLE,FL 322101905	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1124-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137924 <b>CLAIM NUMBER :</b> 1124 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TAMARA CARUS <b>CLAIMANT :</b> TAMARA CARUS 24521 SW 217TH AVE HOMESTEAD,FL 330313669	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1125-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138218 <b>CLAIM NUMBER :</b> 1125 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHARLES WILKINSON <b>CLAIMANT :</b> CHARLES WILKINSON 5617 SKIMMER DR APOLLO BEACH,FL 335723353	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1126-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138223 <b>CLAIM NUMBER :</b> 1126 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DANIEL MELUCCI <b>CLAIMANT :</b> DANIEL MELUCCI 4080 IRONWOOD CIR 303-C BRADENTON,FL 34209	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1127-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138259 <b>CLAIM NUMBER :</b> 1127 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOE KELLER <b>CLAIMANT :</b> JOE KELLER 243 SCENIC DR COCOA,FL 329262577	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1128-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138357 <b>CLAIM NUMBER :</b> 1128 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOSEPH KOHL <b>CLAIMANT :</b> JOSEPH KOHL 3537 GORMAN DR NEW PORT RICHEY,FL 346552605	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1129-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138359 <b>CLAIM NUMBER :</b> 1129 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> KEVIN NEPAUL <b>CLAIMANT :</b> KEVIN NEPAUL 2629 VINEYARD CIR SANFORD,FL 327716847	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1130-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138366 <b>CLAIM NUMBER :</b> 1130 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHUANGMING CHEN <b>CLAIMANT :</b> CHUANGMING CHEN 13316 LOW TIDE WAY JACKSONVILLE,FL 322585206	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1131-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138388 <b>CLAIM NUMBER :</b> 1131 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> AMIT PANDEY <b>CLAIMANT :</b> AMIT PANDEY 8824 ELLIOTTS CT ORLANDO,FL 328365027	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1132-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138543 <b>CLAIM NUMBER :</b> 1132 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SRINIVAS YARRAGUNTA <b>CLAIMANT :</b> SRINIVAS YARRAGUNTA 3821 HARTWOOD CT JACKSONVILLE,FL 322161488	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1133-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138571 <b>CLAIM NUMBER :</b> 1133 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> AMIT SINHA <b>CLAIMANT :</b> AMIT SINHA  1250 STANDRIDGE DR WESLEY CHAPEL,FL 335437658	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1134-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138629 <b>CLAIM NUMBER :</b> 1134 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DEBRA RUBINS <b>CLAIMANT :</b> DEBRA RUBINS  12903 NW 151ST RD ALACHUA,FL 326155741	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1135-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138678 <b>CLAIM NUMBER :</b> 1135 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MANHUA SUN <b>CLAIMANT :</b> MANHUA SUN  4045 PALMA CEIA CIR WINTER HAVEN,FL 338841292	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1136-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138768 <b>CLAIM NUMBER :</b> 1136 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOHN TANGRI <b>CLAIMANT :</b> JOHN TANGRI  7201 BLACK BULL LN ORLANDO,FL 328355168	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1137-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138770 <b>CLAIM NUMBER :</b> 1137 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SUREKHA PATEL <b>CLAIMANT :</b> SUREKHA PATEL  10722 CORY LAKE DR TAMPA,FL 336472724	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1138-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138825 <b>CLAIM NUMBER :</b> 1138 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> KRISHNA AJVALIA <b>CLAIMANT :</b> KRISHNA AJVALIA  9710 ASBEL ESTATES ST LAND O LAKES,FL 346386144	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1139-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139103 <b>CLAIM NUMBER :</b> 1139 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ROBERT PADGHAM <b>CLAIMANT :</b> ROBERT PADGHAM 6005 BRIARFOREST RD N JACKSONVILLE,FL 322771401	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1140-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139180 <b>CLAIM NUMBER :</b> 1140 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RACHID MEHDAOVA <b>CLAIMANT :</b> RACHID MEHDAOVA 20151 OAKFLOWER AVE TAMPA,FL 336473649	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1141-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139296 <b>CLAIM NUMBER :</b> 1141 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> PAULETTE PILIPAUSKIS <b>CLAIMANT :</b> PAULETTE PILIPAUSKIS 2234 BIRDWOOD DR ORANGE PARK,FL 320735302	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1142-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139309 <b>CLAIM NUMBER :</b> 1142 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> NAMITA JHA <b>CLAIMANT :</b> NAMITA JHA 7975 MONTEREY BAY DR JACKSONVILLE,FL 322562927	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1143-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139322 <b>CLAIM NUMBER :</b> 1143 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> PHILLIP MARTIN <b>CLAIMANT :</b> PHILLIP MARTIN 261 SW NIGHTSHADE DR LAKE CITY,FL 320244802	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1144-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139346 <b>CLAIM NUMBER :</b> 1144 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RAM & SANTOSH ARYA <b>CLAIMANT :</b> RAM & SANTOSH ARYA 190 SW PALM COVE DR PALM CITY,FL 349904322	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1145-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139369 <b>CLAIM NUMBER :</b> 1145 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TAMMILEA CHAMI <b>CLAIMANT :</b> TAMMILEA CHAMI  514 WILSHIRE DR CASSELBERRY,FL 327075429	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1146-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139438 <b>CLAIM NUMBER :</b> 1146 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARION GRANT <b>CLAIMANT :</b> MARION GRANT  2278 ANCHORAGE LN APT B NAPLES,FL 341041203	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1147-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139522 <b>CLAIM NUMBER :</b> 1147 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHRISTINE WILKINS <b>CLAIMANT :</b> CHRISTINE WILKINS  224 GILDA PL NW FORT WALTON BEACH,FL 325484202	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1148-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139523 <b>CLAIM NUMBER :</b> 1148 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SUSAN BECKHAM <b>CLAIMANT :</b> SUSAN BECKHAM  1228 SE 21ST TER CAPE CORAL,FL 339906615	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1149-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139568 <b>CLAIM NUMBER :</b> 1149 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SEAN VARGYAI MARY GANTZ <b>CLAIMANT :</b> SEAN VARGYAI MARY GANTZ  1630 BAY HARBOR LN SARASOTA,FL 342313041	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1150-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139611 <b>CLAIM NUMBER :</b> 1150 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> GREG FOLSTER <b>CLAIMANT :</b> GREG FOLSTER  14627 ASTINA WAY ORLANDO,FL 328377216	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1151-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139623 <b>CLAIM NUMBER :</b> 1151 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RENARD & LAURA IARUSSI <b>CLAIMANT :</b> RENARD & LAURA IARUSSI  5200 N FLAGLER DR WEST PALM BEACH,FL 334072755	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1152-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139640 <b>CLAIM NUMBER :</b> 1152 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARGARET POWERS <b>CLAIMANT :</b> MARGARET POWERS  12805 WOODBINE DR HUDSON,FL 346676914	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1153-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139707 <b>CLAIM NUMBER :</b> 1153 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARK DUKAS <b>CLAIMANT :</b> MARK DUKAS  2309 W TEXAS AVE TAMPA,FL 336296235	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1154-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139724 <b>CLAIM NUMBER :</b> 1154 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SUSAN JACOBUS <b>CLAIMANT :</b> SUSAN JACOBUS  2808 CYNTHIA CT PANAMA CITY,FL 324057211	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1155-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139795 <b>CLAIM NUMBER :</b> 1155 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> KARL HEURING <b>CLAIMANT :</b> KARL HEURING  8430 MARIA CT CAPE CANAVERAL,FL 329202686	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1156-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139939 <b>CLAIM NUMBER :</b> 1156 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> STEPHANIE SIMMONS <b>CLAIMANT :</b> STEPHANIE SIMMONS  2124 UNIVERSITY DRIVE ORLANDO,FL 32804	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1157-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139940 <b>CLAIM NUMBER :</b> 1157 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> STEPHANIE SIMMONS <b>CLAIMANT :</b> STEPHANIE SIMMONS  2118 UNIVERSITY DR ORLANDO,FL 32804	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1158-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139999 <b>CLAIM NUMBER :</b> 1158 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BARRY LOPER <b>CLAIMANT :</b> BARRY LOPER  1861 53RD ST S GULFPORT,FL 337074257	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1159-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140027 <b>CLAIM NUMBER :</b> 1159 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LAN FRONDA <b>CLAIMANT :</b> LAN FRONDA  8411 ANDES DR N JACKSONVILLE,FL 322446418	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1160-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140068 <b>CLAIM NUMBER :</b> 1160 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DAVE MCLANE <b>CLAIMANT :</b> DAVE MCLANE  4809 JEANETTE CT SAINT CLOUD,FL 347714857	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1161-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140102 <b>CLAIM NUMBER :</b> 1161 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LORI ANN BALL <b>CLAIMANT :</b> LORI ANN BALL  14832 SW 166TH ST MIAMI,FL 331871422	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1162-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140108 <b>CLAIM NUMBER :</b> 1162 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHERYL KERSHAW <b>CLAIMANT :</b> CHERYL KERSHAW  3828 MISTY WAY DESTIN,FL 325412124	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1163-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140110 <b>CLAIM NUMBER :</b> 1163 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DANIEL STEINBERGER <b>CLAIMANT :</b> DANIEL STEINBERGER 1751 W HEWETT RD SANTA ROSA BEACH,FL 324593329	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1164-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140131 <b>CLAIM NUMBER :</b> 1164 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DONALD SIMMONS <b>CLAIMANT :</b> DONALD SIMMONS 9705 HICKORY HOLLOW RD LOT 48 LEESBURG,FL 347889363	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1165-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140135 <b>CLAIM NUMBER :</b> 1165 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RYAN O REILLY <b>CLAIMANT :</b> RYAN O REILLY 11029 LEGACY BLVD PALM BEACH GARDENS,FL 334103619	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1166-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140244 <b>CLAIM NUMBER :</b> 1166 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RAMZI DALLOO <b>CLAIMANT :</b> RAMZI DALLOO 5 EGAN DR PALM COAST,FL 321646277	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1167-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140334 <b>CLAIM NUMBER :</b> 1167 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JULIE SMITH <b>CLAIMANT :</b> JULIE SMITH 456 W 10TH AVE MOUNT DORA,FL 327574229	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1168-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140458 <b>CLAIM NUMBER :</b> 1168 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> NEIL SAPIN <b>CLAIMANT :</b> NEIL SAPIN 4660 OCEAN BLVD APT P1 SARASOTA,FL 342421352	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

## EXHIBIT A



FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1169-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140497 <b>CLAIM NUMBER :</b> 1169 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ALAN VANDEVENDER <b>CLAIMANT :</b> ALAN VANDEVENDER  1108 BRANCHWOOD DR APOPKA,FL 327035951	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1170-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140532 <b>CLAIM NUMBER :</b> 1170 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARK MOREHOUSE <b>CLAIMANT :</b> MARK MOREHOUSE  6245 S BEND SQ ORLANDO,FL 328074245	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1171-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140642 <b>CLAIM NUMBER :</b> 1171 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> AMIT SINHA <b>CLAIMANT :</b> AMIT SINHA  16106 CONDOVER CT TAMPA,FL 336471042	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1172-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140855 <b>CLAIM NUMBER :</b> 1172 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JEAN J DRIVER <b>CLAIMANT :</b> JEAN J DRIVER  1819 SOUND HAMMOCK DR NAVARRE,FL 325667344	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1173-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140891 <b>CLAIM NUMBER :</b> 1173 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> WENDY WAGER <b>CLAIMANT :</b> WENDY WAGER  129 BECKET LN LAKE MARY,FL 327464351	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1174-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1174 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> 1/2 PRICE PLUMBING  18911 NW 10TH ST PEMBROKE PINES,FL 330292926	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1175-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1175 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> 24 HOUR AIR SERVICE 20725 NE 16TH AVE STE A21 MIAMI,FL 331792151	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$161.88 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$161.88
<b>COMPANY:</b> 547 <b>ID NO :</b> 1176-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1176 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> 4 H PLUMBING 16430 S HIGHWAY 475 SUMMERFIELD,FL 344914968	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$95.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$95.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1177-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1177 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> A A APPLIANCE REPAIR LLC 1188 BERT RD STE 8 JACKSONVILLE,FL 322115869	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1178-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1178 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> A ACCURATE AIR CONDITIONING & HEATING LLC PO BOX 445 SORRENTO,FL 327760445	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1179-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1179 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> A COOL BREEZE 2543 E US HIGHWAY 192 KISSIMMEE,FL 347444993	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1180-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1180 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> A EARLS APPLIANCE SERVICE 4300 ROXBOROUGH PL PENSACOLA,FL 325148210	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1181-1	<b>CLAIM NUMBER :</b> 1181	<b>CLAIMANT :</b> A LUMINATION ELECTRIC INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3717 N PINE HILLS RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328082518		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1182-1	<b>CLAIM NUMBER :</b> 1182	<b>CLAIMANT :</b> A PLUS SERVICE AND REPAIR	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3926 RUBY DR W	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322466421		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1183-1	<b>CLAIM NUMBER :</b> 1183	<b>CLAIMANT :</b> A SUPERIOR AIR CONDITIONING COMPANY	<b>AMOUNT RECOMMENDED :</b>	\$30.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 19527	<b>AMOUNT RECMD CLAIMANT :</b>	\$30.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PANAMA CITY BEACH,FL 324171527		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1184-1	<b>CLAIM NUMBER :</b> 1184	<b>CLAIMANT :</b> A TO Z CONTRACTING & PLUMBING INC	<b>AMOUNT RECOMMENDED :</b>	\$48.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	406 HAMLET RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$48.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322211128		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1185-1	<b>CLAIM NUMBER :</b> 1185	<b>CLAIMANT :</b> A GONZALEZ APPLIANCE SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$142.25
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	13902 SW 27TH TER	<b>AMOUNT RECMD CLAIMANT :</b>	\$142.25
	<b>DATE PROOF FILED :</b> 02/19/2015	MIAMI,FL 331756531		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1186-1	<b>CLAIM NUMBER :</b> 1186	<b>CLAIMANT :</b> A/C DESIGNS OF ST AUGUSTINE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	103 LIBERTY CENTER PL	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ST AUGUSTINE,FL 320920919		

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1187-1	<b>CLAIM NUMBER :</b> 1187	<b>CLAIMANT :</b> A/C ENGINEERS INC	<b>AMOUNT RECOMMENDED :</b>	\$499.50
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 350360	<b>AMOUNT RECMD CLAIMANT :</b>	\$499.50
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322350360		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1188-1	<b>CLAIM NUMBER :</b> 1188	<b>CLAIMANT :</b> A 1 AMERICAN ELECTRIC INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	15645 89TH AVE N	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WEST PALM BEACH,FL 334181841		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1189-1	<b>CLAIM NUMBER :</b> 1189	<b>CLAIMANT :</b> A 1 GARAGE DOOR SERVICES	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4241 HEADSAIL DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	NEW PORT RICHEY,FL 346524419		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1190-1	<b>CLAIM NUMBER :</b> 1190	<b>CLAIMANT :</b> AA APPLIANCE REPAIR LLCFL	<b>AMOUNT RECOMMENDED :</b>	\$550.96
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3815 HEATH RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$550.96
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322772046		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1191-1	<b>CLAIM NUMBER :</b> 1191	<b>CLAIMANT :</b> AAA APPLIANCE EXPERTS	<b>AMOUNT RECOMMENDED :</b>	\$274.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 10264	<b>AMOUNT RECMD CLAIMANT :</b>	\$274.00
	<b>DATE PROOF FILED :</b> 02/19/2015	BRADENTON,FL 342820264		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1192-1	<b>CLAIM NUMBER :</b> 1192	<b>CLAIMANT :</b> AAA OVERHEAD DOOR INC	<b>AMOUNT RECOMMENDED :</b>	\$284.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 51557	<b>AMOUNT RECMD CLAIMANT :</b>	\$284.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE BEACH,FL 322401557		

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1193-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1193 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ABCOOL A/C & HEAT/BT ENTERPRISES PO BOX 616579 ORLANDO,FL 328616579	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1194-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1194 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ABLE PLUMBING REPAIR INC 170 COLLEGE DR ORANGE PARK,FL 320657655	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$321.50 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$321.50
<b>COMPANY:</b> 547 <b>ID NO :</b> 1195-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1195 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ABOVE ALL APPLIANCE SERVICES 14440 SW 51ST ST MIAMI,FL 331755744	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1196-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1196 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ABSOLUTE AIR SOLUTIONS 3173 MILL RUN CT NORTH PORT,FL 342871806	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1197-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1197 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ABSOLUTE PLUMBING LLC 917 N RAILROAD AVE WEST PALM BEACH,FL 334013303	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1198-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1198 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AC SERVICE INC PO BOX 8142 SOUTHPORT,FL 324098142	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1199-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1199 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ACE APPLIANCE SERVICE  PO BOX 26462 PENSACOLA,FL 32516	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1200-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1200 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ACTION AUTOMATIC DOOR & GATE  11360 METRO PKWY FORT MYERS,FL 339661205	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$54.95 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$54.95
<b>COMPANY:</b> 547 <b>ID NO :</b> 1201-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1201 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ADAMS COOLING & HEATING INC  7130 225TH ST E BRADENTON,FL 342117569	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1202-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1202 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ADCO OVERHEAD GARAGE DOOR  7577 NW 50TH ST MIAMI,FL 331665553	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$104.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$104.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1203-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1203 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ADMIRAL PLUMBING SERVICES LLC  2895 JUPITER PARK DR STE 700 JUPITER,FL 334586049	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1204-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1204 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ADVANCE GARAGE DOOR SERVICE INC  10473 CRESTO DELSOL CIR ORLANDO,FL 328173394	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$130.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$130.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1205-1	<b>CLAIM NUMBER :</b> 1205	<b>CLAIMANT :</b> ADVANCE MAINTENANCE & REPAIR GARAGE DOORS	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	10473 CRESTO DELSOL CIR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328173394		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1206-1	<b>CLAIM NUMBER :</b> 1206	<b>CLAIMANT :</b> ADVANCED APPLIANCE SERVICE FL	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	5201 BOAT RACE RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PANAMA CITY,FL 324047202		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1207-1	<b>CLAIM NUMBER :</b> 1207	<b>CLAIMANT :</b> ADVANCED PLUMBING AND DRAINING CLEANING	<b>AMOUNT RECOMMENDED :</b>	\$54.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	10065 SAVANNAH BLUFF LN	<b>AMOUNT RECMD CLAIMANT :</b>	\$54.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328298230		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1208-1	<b>CLAIM NUMBER :</b> 1208	<b>CLAIMANT :</b> ADVANTAGE MAYTAG	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1010 SAINT LOUIS RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	COLLINSVILLE,IL 622342029		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1209-1	<b>CLAIM NUMBER :</b> 1209	<b>CLAIMANT :</b> AFFORDABLE APPLIANCE REPAIR	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 1687	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	OCALA,FL 344781687		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1210-1	<b>CLAIM NUMBER :</b> 1210	<b>CLAIMANT :</b> AFTER 5IVE SERVICES INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2777 S CONGRESS AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PALM SPRINGS,FL 334612137		

## EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1211-1	<b>CLAIM NUMBER :</b> 1211	<b>CLAIMANT :</b> AGGRESSIVE APPLIANCE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	617 MERCY DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328051055		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1212-1	<b>CLAIM NUMBER :</b> 1212	<b>CLAIMANT :</b> AIR PRO OF BREVARD LLC	<b>AMOUNT RECOMMENDED :</b>	\$100.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4200 LAKEMONT RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$100.00
	<b>DATE PROOF FILED :</b> 02/19/2015	MELBOURNE,FL 329347728		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1213-1	<b>CLAIM NUMBER :</b> 1213	<b>CLAIMANT :</b> AIR 1 HVAC LLC	<b>AMOUNT RECOMMENDED :</b>	\$678.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	52 RILEY RD STE 325	<b>AMOUNT RECMD CLAIMANT :</b>	\$678.00
	<b>DATE PROOF FILED :</b> 02/19/2015	CELEBRATION,FL 34747		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1214-1	<b>CLAIM NUMBER :</b> 1214	<b>CLAIMANT :</b> AIR AMERICA AIR CONDI HEATING & REF LLC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	12550 NW 39TH ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	CORAL SPRINGS,FL 33065		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1215-1	<b>CLAIM NUMBER :</b> 1215	<b>CLAIMANT :</b> AIR COMFORT SERVICE CO LLC	<b>AMOUNT RECOMMENDED :</b>	\$165.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4632 SPEARS ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$165.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PACE,FL 325711424		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1216-1	<b>CLAIM NUMBER :</b> 1216	<b>CLAIMANT :</b> AIR CONDITIONING & APPLIANCE BY JIM	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1229 SW 46TH AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	DEERFIELD BEACH,FL 334428279		

EXHIBIT A



SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1217-1	<b>CLAIM NUMBER :</b> 1217	<b>CLAIMANT :</b> AIR CONDITIONING ENGINEERS	<b>AMOUNT RECOMMENDED :</b>	\$454.71
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 2109	<b>AMOUNT RECMD CLAIMANT :</b>	\$454.71
	<b>DATE PROOF FILED :</b> 02/19/2015	FORT WALTON BEACH,FL 325492109		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1218-1	<b>CLAIM NUMBER :</b> 1218	<b>CLAIMANT :</b> AIR DUCKS HEATING & AIR INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	803 TURKEY CRK	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ALACHUA,FL 326159314		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1219-1	<b>CLAIM NUMBER :</b> 1219	<b>CLAIMANT :</b> AIR IT COOL CORP	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	11725 MANGO GROVES BLVD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	SEFFNER,FL 335846405		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1220-1	<b>CLAIM NUMBER :</b> 1220	<b>CLAIMANT :</b> AIR KING CORP	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	14965 OATLAND CT	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WELLINGTON,FL 334141002		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1221-1	<b>CLAIM NUMBER :</b> 1221	<b>CLAIMANT :</b> AIR OPTIONS INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	312 EDSON DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORANGE PARK,FL 320733304		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1222-1	<b>CLAIM NUMBER :</b> 1222	<b>CLAIMANT :</b> AIR SOURCE	<b>AMOUNT RECOMMENDED :</b>	\$694.34
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4395 PLOMPTON DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$694.34
	<b>DATE PROOF FILED :</b> 02/19/2015	MELBOURNE,FL 329352938		

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1223-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1223 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AIR SYSTEMS OF LAKELAND LLC 5615 LAUREL OAK DR LAKELAND,FL 338111942	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1224-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1224 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AIR ZONE A/C & HEATING INC 120 COMMERCE BLVD STE 3 OLDSMAR,FL 346772811	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1225-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1225 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AIR FLO/ ERWOOD HEATING & AIR 10650 72ND ST STE 405 LARGO,FL 337771517	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$360.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$360.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1226-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1226 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AL CHEAPO APPLIANCE 529 PEACHTREE ST COCOA,FL 329227265	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1227-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1227 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALBRITTON ELECTRICAL SERVICE INC 4821 SIX OAKS DR TALLAHASSEE,FL 323036834	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1228-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1228 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALC APPLIANCE REPAIR 7828 WOODPOINTE DR PENSACOLA,FL 325146625	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$350.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$350.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1229-1	<b>CLAIM NUMBER :</b> 1229	<b>CLAIMANT :</b> ALCA PLUMBING CO	<b>AMOUNT RECOMMENDED :</b>	\$105.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3612 FOXWOOD BLVD	<b>AMOUNT RECMD CLAIMANT :</b>	\$105.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WESLEY CHAPEL,FL 335435159		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1230-1	<b>CLAIM NUMBER :</b> 1230	<b>CLAIMANT :</b> ALDRIDGE & SONS PLUMBING CNTRCS INC	<b>AMOUNT RECOMMENDED :</b>	\$369.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 600921	<b>AMOUNT RECMD CLAIMANT :</b>	\$369.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322600921		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1231-1	<b>CLAIM NUMBER :</b> 1231	<b>CLAIMANT :</b> ALEXANDRE GRASAS	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2735 SW 35TH PL APT 206	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	GAINESVILLE,FL 326083281		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1232-1	<b>CLAIM NUMBER :</b> 1232	<b>CLAIMANT :</b> ALFORD APPLIANCE SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$74.68
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 111193	<b>AMOUNT RECMD CLAIMANT :</b>	\$74.68
	<b>DATE PROOF FILED :</b> 02/19/2015	PALM BAY,FL 329111193		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1233-1	<b>CLAIM NUMBER :</b> 1233	<b>CLAIMANT :</b> ALL A/C SERVICE LLC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	16215 SR 50 STE 306	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	CLERMONT,FL 347116000		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1234-1	<b>CLAIM NUMBER :</b> 1234	<b>CLAIMANT :</b> ALL ABOUT APPLIANCES	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2017 CASTANO PL	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LADY LAKE,FL 321599503		

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1235-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1235 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALL AMERICAN APPLIANCE  3780 BURNS RD STE 2 PALM BEACH GARDENS,FL 334104229	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1236-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1236 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALL AMERICAN DECKS AND SPAS  1843 BARBER ROAD SARASOTA,FL 34240	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$455.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$455.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1237-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1237 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALL AMERICAN MANAGEMENT  1250 W SR 434 STE 1000 LONGWOOD,FL 327504969	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1238-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1238 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALL AREA ROOFING & WATERPROOFING INC  3921 S US HIGHWAY 1 FORT PIERCE,FL 349826623	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1239-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1239 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALL BRANDS APPLIANCE INC  5008 W LINEBAUGH AVE STE 8 TAMPA,FL 336245006	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1240-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1240 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALL BRIGHT CUSTOM INC  PO BOX 451057 KISSIMMEE,FL 347451057	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$829.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$829.00

**EXHIBIT A**

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1241-1	<b>CLAIM NUMBER :</b> 1241	<b>CLAIMANT :</b> ALL FINAL ELECTRIC INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1849 SW OPEN VIEW DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PORT ST LUCIE,FL 349535151		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1242-1	<b>CLAIM NUMBER :</b> 1242	<b>CLAIMANT :</b> ALL FLORIDA APPLIANCE & AC	<b>AMOUNT RECOMMENDED :</b>	\$175.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	26211 CHIANINA DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$175.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WESLEY CHAPEL,FL 335443205		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1243-1	<b>CLAIM NUMBER :</b> 1243	<b>CLAIMANT :</b> ALL PHASE ELECTRIC SERVICE OF FL INC	<b>AMOUNT RECOMMENDED :</b>	\$192.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	200 CENTER RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$192.00
	<b>DATE PROOF FILED :</b> 02/19/2015	FORT MYERS,FL 339071511		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1244-1	<b>CLAIM NUMBER :</b> 1244	<b>CLAIMANT :</b> ALL PHASE PLUMBING OF FLORIDA	<b>AMOUNT RECOMMENDED :</b>	\$117.50
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	835 NYASA AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$117.50
	<b>DATE PROOF FILED :</b> 02/19/2015	FORT MYERS,FL 339137546		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1245-1	<b>CLAIM NUMBER :</b> 1245	<b>CLAIMANT :</b> ALL PRO ELECTRIC INC	<b>AMOUNT RECOMMENDED :</b>	\$489.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	9620 BRADLEY RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$489.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322160318		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1246-1	<b>CLAIM NUMBER :</b> 1246	<b>CLAIMANT :</b> ALL PRO PLUMBING & DRAINS INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1765 E NINE MILE RD # 223	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	STE 1 PENSACOLA,FL 325145480		

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1247-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1247 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALL SERVICE PLUMBING 735 NE 19TH PL UNIT 5 CAPE CORAL,FL 339097812	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$679.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$679.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1248-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1248 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALL SERVICE PLUMBING & IRRIGATION 735 NE 19TH PL UNIT 5 CAPE CORAL,FL 339097812	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1249-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1249 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALL SERVICE PLUMBING OF PASCO INC PO BOX 1784 NEW PORT RICHEY,FL 346561784	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$250.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$250.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1250-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1250 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALL WEATHER AIR INC 510 BOB SIKES BLVD FORT WALTON BEACH,FL 325472107	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$260.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$260.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1251-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1251 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALLENS APPLIANCE SERVICE FL 830 BUFORD AVE ORANGE CITY,FL 327638847	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$107.74 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$107.74
<b>COMPANY:</b> 547 <b>ID NO :</b> 1252-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1252 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALLIANCE AIR COMFORT PO BOX 7038 WEST PALM BEACH,FL 334057038	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1253-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1253 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALLIANCE REFRIGERATION LLC 5109 LAKE NINA DR ORLANDO,FL 328103344	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$510.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$510.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1254-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1254 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALLIED DOORS INC 1509 RAIL HEAD BLVD NAPLES,FL 341108434	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1255-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1255 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALTIER MECHANICAL SERVICES INC 4351 35TH ST ORLANDO,FL 328116509	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,455.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,455.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1256-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1256 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALWAYS AIR INC 6809 WESTEND AVE NEW PORT RICHEY,FL 346553337	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1257-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1257 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ALWAYS SPEEDY APPLIANCE SERVICE INC 2174 J AND C BLVD NAPLES,FL 341092001	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1258-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1258 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AMELIA PLUMBING INC PO BOX 50155 JACKSONVILLE BEACH,FL 322400155	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$244.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$244.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1259-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1259 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AMERICAN DRAIN SYSTEM 13190 SW 10TH TERRACE DR MIAMI,FL 331842070	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$620.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$620.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1260-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1260 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AMERICAN EAGLE APPLIANCE REPAIR 2014 EDGEWATER DR STE 174 ORLANDO,FL 328045312	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$320.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$320.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1261-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1261 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AMERICAN GARAGE DOOR 9217 LYRIC DRIVE PENSACOLA,FL 32514	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$140.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$140.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1262-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1262 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AMERICAN HOME APPLIANCE REPAIR PO BOX 421232 KISSIMMEE,FL 347421232	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1263-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1263 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AMERICAN LEAK DETECTION PO BOX 521029 LONGWOOD,FL 327521029	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,580.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,580.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1264-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1264 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AMERICAN LEAK DETECTION PENSACOLAFL PO BOX 7696 PENSACOLA,FL 325340696	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$110.10 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$110.10

EXHIBIT A



SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1265-1	<b>CLAIM NUMBER :</b> 1265	<b>CLAIMANT :</b> AMERICAS BEST AIR CONDITIONING	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	12154 SW 131ST AVE # 3	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	MIAMI,FL 331866446		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1266-1	<b>CLAIM NUMBER :</b> 1266	<b>CLAIMANT :</b> AMPM DOOR SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$650.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	273 GLENWOOD DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$650.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LAKELAND,FL 338051928		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1267-1	<b>CLAIM NUMBER :</b> 1267	<b>CLAIMANT :</b> ANGELIC AIR INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	700 S SMITH AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	INVERNESS,FL 344538955		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1268-1	<b>CLAIM NUMBER :</b> 1268	<b>CLAIMANT :</b> ANGELS APPLIANCE REPAIR	<b>AMOUNT RECOMMENDED :</b>	\$338.20
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	5533 WILKINS RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$338.20
	<b>DATE PROOF FILED :</b> 02/19/2015	TAMPA,FL 336109533		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1269-1	<b>CLAIM NUMBER :</b> 1269	<b>CLAIMANT :</b> ANYTIME ELECTRIC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 1687	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	CRAWFORDVILLE,FL 323261687		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1270-1	<b>CLAIM NUMBER :</b> 1270	<b>CLAIMANT :</b> APEX APPLIANCE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3949 FORSYTH RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WINTER PARK,FL 327926812		

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1271-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1271 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> APOLLO HOME APPL & ELECTRONICS REPAIR 1490 BARN AVE TITUSVILLE,FL 327804481	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1272-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1272 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> APOLLO POOLS 235 W BRANDON BLVD BRANDON,FL 335115103	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1273-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1273 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> APPLIANCE COMPANY FL 7413 COUNTY RD 17 S SEBRING,FL 33870	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1274-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1274 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> APPLIANCE DOCTOR OF CITRUS 6840 W AVOCADO ST CRYSTAL RIVER,FL 344295680	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1275-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1275 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> APPLIANCE DOCTOR OF NW FL INC 3432 E HIGHWAY 98 PANAMA CITY,FL 32401	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$89.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$89.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1276-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1276 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> APPLIANCE OUTLET OF SW FL INC 11196 S CLEVELAND AVE FORT MYERS,FL 339072321	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

**EXHIBIT A**

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1277-1	<b>CLAIM NUMBER :</b> 1277	<b>CLAIMANT :</b> APPLIANCE PROS OF TALLAHASSEE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	218 BANNERMAN RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	TALLAHASSEE,FL 323125087		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1278-1	<b>CLAIM NUMBER :</b> 1278	<b>CLAIMANT :</b> APPLIANCE REPAIR PROS	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1769 PONTIAC CIR S	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	MELBOURNE,FL 329354975		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1279-1	<b>CLAIM NUMBER :</b> 1279	<b>CLAIMANT :</b> APPLIANCE REPAIR SERVICE FL	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4512 1ST AVENUE DR NW	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	BRADENTON,FL 342092905		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1280-1	<b>CLAIM NUMBER :</b> 1280	<b>CLAIMANT :</b> APPLIANCE SERVICE CO	<b>AMOUNT RECOMMENDED :</b>	\$1,677.22
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	9950 ORANGE RIVER BLVD	<b>AMOUNT RECMD CLAIMANT :</b>	\$1,677.22
	<b>DATE PROOF FILED :</b> 02/19/2015	FORT MYERS,FL 339053317		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1281-1	<b>CLAIM NUMBER :</b> 1281	<b>CLAIMANT :</b> APPLIANCES OF ORLANDO	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	685 N SEMORAN BLVD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328073341		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1282-1	<b>CLAIM NUMBER :</b> 1282	<b>CLAIMANT :</b> AQUATIC SOLUTIONS OF CENTRAL FLORIDA	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	5437 WINTER RUN DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328392566		

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1283-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1283 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ARLINGTON ELECTRIC  PO BOX 63 STUART,FL 349950063	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1284-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1284 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ART STOVER PLUMBING INC  552 NW MERCANTILE PL PORT ST LUCIE,FL 349862252	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1285-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1285 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ASSURED COMFORT HEATING & COOLING  PO BOX 3673 SPRING HILL,FL 346113673	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$176.63 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$176.63
<b>COMPANY:</b> 547 <b>ID NO :</b> 1286-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1286 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> A STONE PLUM CO OF HILLSBOROUGH COUNTY  11028 BLACK SWAN CT SEFFNER,FL 335848334	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1287-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1287 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AT YOUR POOL SERVICE LLC  233 ROBIN RD ALTAMONTE SPRINGS,FL 327015017	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1288-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1288 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ATLANTIC POOLS  817 WALNUT PL # P ALTAMONTE SPRINGS,FL 327016460	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1289-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1289 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AUSTIN PERRY INC 5320 W STATE RD 84 DAVIE,FL 33314	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$155.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$155.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1290-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1290 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AUTOMATIC CONTROL A/C CORP 5769 NW 69TH WAY PARKLAND,FL 330671351	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1291-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1291 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> AZ REMODELING AND PLUMBING INC 5030 CHAMPION BLVD UNIT G6-244 BOCA RATON,FL 334962473	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$958.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$958.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1292-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1292 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> B & B PROFESSIONAL PLUMBING 707 BELLEAIR RD CLEARWATER,FL 337562107	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1293-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1293 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> B & G REFRIGERATION/ELECTRICAL 3230 KLINE RD JACKSONVILLE,FL 322463635	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$195.32 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$195.32
<b>COMPANY:</b> 547 <b>ID NO :</b> 1294-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1294 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BALL AIR CONDITIONING LLC 2524 COMMUNITY RD JACKSONVILLE,FL 322077828	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1295-1	<b>CLAIM NUMBER :</b> 1295	<b>CLAIMANT :</b> BARFIELD CONTRACTING & ASSOCIATES INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1311 US HIGHWAY 1	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ROCKLEDGE,FL 329552854		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1296-1	<b>CLAIM NUMBER :</b> 1296	<b>CLAIMANT :</b> BAY TO BAY APPLIANCE REPAIR	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 5396	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PLANT CITY,FL 335630042		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1297-1	<b>CLAIM NUMBER :</b> 1297	<b>CLAIMANT :</b> BAYFRONT PLUMBING INC	<b>AMOUNT RECOMMENDED :</b>	\$45.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	5751 LARIMER AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$45.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PENSACOLA,FL 325078891		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1298-1	<b>CLAIM NUMBER :</b> 1298	<b>CLAIMANT :</b> BAYSIDE GARAGE DOORS	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	24015 TIMBERSET CT	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LUTZ,FL 335596729		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1299-1	<b>CLAIM NUMBER :</b> 1299	<b>CLAIMANT :</b> BCI HOME SERVICES INC	<b>AMOUNT RECOMMENDED :</b>	\$169.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3141 TIMUCUA CIR	<b>AMOUNT RECMD CLAIMANT :</b>	\$169.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328377122		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1300-1	<b>CLAIM NUMBER :</b> 1300	<b>CLAIMANT :</b> BEACH APPLIANCE PARTS & SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	9007 FRONT BEACH RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PANAMA CITY BEACH,FL 324074236		

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1301-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1301 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BEST OF THE BAY SPAS LLC  PO BOX 272988 TAMPA,FL 336882988	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$227.50 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$227.50
<b>COMPANY:</b> 547 <b>ID NO :</b> 1302-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1302 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BETTER HOMES A/C  PO BOX 4428 CLEARWATER,FL 337584428	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$448.58 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$448.58
<b>COMPANY:</b> 547 <b>ID NO :</b> 1303-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1303 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BGAMERICAN PLUMBING INC  2215 CYPRESS ISLAND DR POMPANO BEACH,FL 330695647	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1304-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1304 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BILL FENWICK PLUMBING INC  8245 BEACH BLVD JACKSONVILLE,FL 322163136	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1305-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1305 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BILL LAUGHLINS HEATING & AC  1017 LOTHIAN DR TALLAHASSEE,FL 323122838	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$312.50 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$312.50
<b>COMPANY:</b> 547 <b>ID NO :</b> 1306-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1306 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BLANKENSHIP ELECTRIC INC  3028 NE 19TH DR GAINESVILLE,FL 326093315	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$255.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$255.00

**EXHIBIT A**

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1307-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1307 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BLUE RIBBON POOLS  3111 OPPORTUNITY CT STE L SOUTH DAYTONA,FL 321193464	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1308-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1308 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BLUE SKY POOLS  6446 PUTTERS CIR SPRING HILL,FL 346063633	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1309-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1309 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BLUE WATER POOLS  11161 E SR 70 SUITE 105 LAKEWOOD RANCH,FL 34202	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1310-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1310 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BONITA SPRINGS PLUMBING  21159 BRAXFIELD LOOP ESTERO,FL 339286212	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$100.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$100.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1311-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1311 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BREVARD ELECTRIC SERVICES INC  PO BOX 120404 WEST MELBOURNE,FL 329120404	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$499.26 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$499.26
<b>COMPANY:</b> 547 <b>ID NO :</b> 1312-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1312 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> BRITE ELECTRIC AIR CONDITIONING & HEATING  2036 SPRINT BLVD APOPKA,FL 327037700	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$120.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$120.00

EXHIBIT A



## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1313-1	<b>CLAIM NUMBER :</b> 1313	<b>CLAIMANT :</b> BROWNIES WASTE WATER SOLUTIONS	<b>AMOUNT RECOMMENDED :</b>	\$1,634.80
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	11372 UNITED WAY	<b>AMOUNT RECMD CLAIMANT :</b>	\$1,634.80
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328247600		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1314-1	<b>CLAIM NUMBER :</b> 1314	<b>CLAIMANT :</b> BRYANT POOLS INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1032 N US HIGHWAY 1 STE 4	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORMOND BEACH,FL 321744242		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1315-1	<b>CLAIM NUMBER :</b> 1315	<b>CLAIMANT :</b> BUCKEYE PLUMBING SERVICES	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	310 BUSINESS PARK WAY	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ROYAL PALM BEACH,FL 334111748		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1316-1	<b>CLAIM NUMBER :</b> 1316	<b>CLAIMANT :</b> BUILDERS SPECIALTIES OF VENICE INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	245 WARFIELD AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	VENICE,FL 342854640		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1317-1	<b>CLAIM NUMBER :</b> 1317	<b>CLAIMANT :</b> C & W PUMP POOL & MOTORS	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1767 S PATRICK DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	INDIAN HARBOUR BEACH,FL 329374383		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1318-1	<b>CLAIM NUMBER :</b> 1318	<b>CLAIMANT :</b> C E CHANDLER AC & HEATING INC	<b>AMOUNT RECOMMENDED :</b>	\$1,826.84
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	5951 COLTER RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$1,826.84
	<b>DATE PROOF FILED :</b> 02/19/2015	MILTON,FL 325832835		

## EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1319-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1319 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> C LACEY PLUMBING INC 1400 CLEARWATER LARGO RD N LARGO,FL 337701173	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1320-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1320 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CAT APPLIANCES INC 324 LOMA BONITA DR DAVENPORT,FL 338379390	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$186.59 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$186.59
<b>COMPANY:</b> 547 <b>ID NO :</b> 1321-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1321 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CAMPBELL PLUMBING CONTRACTORS SOUTHEAST 11482 COLUMBIA PARK DR W STE 01 JACKSONVILLE,FL 322589488	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1322-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1322 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CAPITAL APPLIANCE SVC & AC PO BOX 7054 SEMINOLE,FL 337757054	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1323-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1323 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CAPITAL CITY VACUUMS 1915 N MONROE ST TALLAHASSEE,FL 323034725	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1324-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1324 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CAPRI SERVICES INC 2565 W NEW HAVEN AVE WEST MELBOURNE,FL 329043701	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$670.91 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$670.91

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1325-1	<b>CLAIM NUMBER :</b> 1325	<b>CLAIMANT :</b> CARETAKERS COMPLETE POOL SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 470762	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	CELEBRATION,FL 347470762		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1326-1	<b>CLAIM NUMBER :</b> 1326	<b>CLAIMANT :</b> CARIBBEAN COOL AIR	<b>AMOUNT RECOMMENDED :</b>	\$329.25
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3200 DEW CT	<b>AMOUNT RECMD CLAIMANT :</b>	\$329.25
	<b>DATE PROOF FILED :</b> 02/19/2015	KISSIMMEE,FL 347449444		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1327-1	<b>CLAIM NUMBER :</b> 1327	<b>CLAIMANT :</b> CARROLL POOL SERVICES INC	<b>AMOUNT RECOMMENDED :</b>	\$195.21
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 1326	<b>AMOUNT RECMD CLAIMANT :</b>	\$195.21
	<b>DATE PROOF FILED :</b> 02/19/2015	DUNEDIN,FL 346971326		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1328-1	<b>CLAIM NUMBER :</b> 1328	<b>CLAIMANT :</b> CARROLLWOOD APPLIANCE INC	<b>AMOUNT RECOMMENDED :</b>	\$838.38
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4111 GUNN HWY	<b>AMOUNT RECMD CLAIMANT :</b>	\$838.38
	<b>DATE PROOF FILED :</b> 02/19/2015	TAMPA,FL 336188725		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1329-1	<b>CLAIM NUMBER :</b> 1329	<b>CLAIMANT :</b> CARTERS APPLIANCE SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$309.20
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 271	<b>AMOUNT RECMD CLAIMANT :</b>	\$309.20
	<b>DATE PROOF FILED :</b> 02/19/2015	ASTATULA,FL 347050271		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1330-1	<b>CLAIM NUMBER :</b> 1330	<b>CLAIMANT :</b> CASS PLUMBING INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 272876	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	TAMPA,FL 336882876		

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1331-1	<b>CLAIM NUMBER :</b> 1331	<b>CLAIMANT :</b> CENTRAL FLORIDA POOL ANS SPA LLC	<b>AMOUNT RECOMMENDED :</b>	\$250.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 701538	<b>AMOUNT RECMD CLAIMANT :</b>	\$250.00
	<b>DATE PROOF FILED :</b> 02/19/2015	SAINT CLOUD,FL 347701538		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1332-1	<b>CLAIM NUMBER :</b> 1332	<b>CLAIMANT :</b> CENTURY APPLIANCE SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$403.35
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 1457	<b>AMOUNT RECMD CLAIMANT :</b>	\$403.35
	<b>DATE PROOF FILED :</b> 02/19/2015	PALATKA,FL 321781457		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1333-1	<b>CLAIM NUMBER :</b> 1333	<b>CLAIMANT :</b> CERTIFIED ELECTRICAL SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	248 N KENTUCKY AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LAKELAND,FL 338014976		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1334-1	<b>CLAIM NUMBER :</b> 1334	<b>CLAIMANT :</b> CERTIFIED PLUMBING SEWER & GAS INC FL	<b>AMOUNT RECOMMENDED :</b>	\$102.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	7075 N BLUE ANGEL PKWY	<b>AMOUNT RECMD CLAIMANT :</b>	\$102.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PENSACOLA,FL 325268022		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1335-1	<b>CLAIM NUMBER :</b> 1335	<b>CLAIMANT :</b> CERTIFIED QUALITY AIR CONDITIONING INC	<b>AMOUNT RECOMMENDED :</b>	\$180.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1782 CHATHAM CIR	<b>AMOUNT RECMD CLAIMANT :</b>	\$180.00
	<b>DATE PROOF FILED :</b> 02/19/2015	APOPKA,FL 327037314		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1336-1	<b>CLAIM NUMBER :</b> 1336	<b>CLAIMANT :</b> CHEMICAL POOLS INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 540056	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	MERRITT ISLAND,FL 329540056		

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1337-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1337 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CHIV ELECTRICAL INC 530 WILLIAMS DITCH RD CANTONMENT,FL 325338259	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1338-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1338 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CHRIS HULME PLBG INC 55010 YELLOW JACKET DR CALLAHAN,FL 320118537	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$125.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$125.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1339-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1339 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CJS ELECTRIC INC 6717 BENJAMIN RD UNIT 112 TAMPA,FL 336344487	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$80.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$80.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1340-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1340 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CLIMATE SOLUTIONS INC 617 NE 25TH AVE STE 1 CAPE CORAL,FL 339092261	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$489.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$489.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1341-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1341 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CNM REPAIRS 1351 N.E 186 ST # 302 E MIAMI,FL 33179	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1342-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1342 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> COCOA BEACH PLUMBING 63 N ORLANDO AVE COCOA BEACH,FL 329312910	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$456.98 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$456.98

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1343-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1343 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> COMFORT CENTRAL  9420 LAZY LN STE A2 TAMPA,FL 336142304	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,105.65 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,105.65
<b>COMPANY:</b> 547 <b>ID NO :</b> 1344-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1344 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> COMFORT SENTRY INC  10150 NEW KINGS RD JACKSONVILLE,FL 322192412	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$382.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$382.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1345-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1345 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> COMFORT ZONE OF NORTH FL INC  5000 US HIGHWAY 17 # 82 ORANGE PARK,FL 320038231	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1346-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1346 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CONTEMPORARY AIR SERVICE INC  1209 SEMINOLA BLVD CASSELBERRY,FL 327073520	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1347-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1347 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CONTINENTAL COOLING & HEATING INC  1065 S PINELLAS AVE # 333 TARPON SPRINGS,FL 346893765	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1348-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1348 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CONTINENTAL PLUMBING SERVICES LLC  PO BOX 793 ELFERS,FL 346800793	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$914.23 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$914.23

**EXHIBIT A**

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1349-1	<b>CLAIM NUMBER :</b> 1349	<b>CLAIMANT :</b> COOKS HEAT & AIR CONDITIONING	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1955 SW MAIN BLVD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LAKE CITY,FL 320250004		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1350-1	<b>CLAIM NUMBER :</b> 1350	<b>CLAIMANT :</b> COOL CHANGE HEATING & AIR LLC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 350480	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322350480		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1351-1	<b>CLAIM NUMBER :</b> 1351	<b>CLAIMANT :</b> COOL PHASE INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	13100 HAZELCREST ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	SPRING HILL,FL 346095956		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1352-1	<b>CLAIM NUMBER :</b> 1352	<b>CLAIMANT :</b> COOLING SERVICES LLC	<b>AMOUNT RECOMMENDED :</b>	\$105.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 931	<b>AMOUNT RECMD CLAIMANT :</b>	\$105.00
	<b>DATE PROOF FILED :</b> 02/19/2015	DESTIN,FL 325400931		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1353-1	<b>CLAIM NUMBER :</b> 1353	<b>CLAIMANT :</b> COOPER APPLIANCES INC	<b>AMOUNT RECOMMENDED :</b>	\$383.65
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1620 63RD AVE E	<b>AMOUNT RECMD CLAIMANT :</b>	\$383.65
	<b>DATE PROOF FILED :</b> 02/19/2015	BRADENTON,FL 342035046		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1354-1	<b>CLAIM NUMBER :</b> 1354	<b>CLAIMANT :</b> CORBETTS APPLIANCE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	40 KATHERINE ST NE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	FORT WALTON BEACH,FL 325472740		

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1355-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1355 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CORBITT MOSELEY PLUMBING & DRAIN CLEANING  10422 MILLER CIR YOUNGSTOWN,FL 324662423	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$911.77 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$911.77
<b>COMPANY:</b> 547 <b>ID NO :</b> 1356-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1356 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> COX POOLS SALES SERVICE & SUPPLIES  PO BOX 19437 PANAMA CITY BEACH,FL 324171437	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$455.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$455.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1357-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1357 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CROWELL PLUMBING & HEATING CO  7305 N FLORIDA AVE TAMPA,FL 336044837	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1358-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1358 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CRYSTAL AIR CONDITIONING AND HEATING  7025 WESTCOTT DR PORT RICHEY,FL 346683854	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$527.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$527.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1359-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1359 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CRYSTAL AIR OF SUMTER  PO BOX 774 LAKE PANASOFFKEE,FL 335380774	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$170.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$170.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1360-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1360 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CRYSTAL BLUE POOL & SPA SERVICE LLC  3959 VAN DYKE RD # 225 LUTZ,FL 335588025	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$174.76 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$174.76

EXHIBIT A



SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1361-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1361 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> CURETON PLUMBING 2717 W THARPE ST TALLAHASSEE,FL 323033251	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1362-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1362 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> D & D ENTERPRISES 548 MARY ESTHER CUT OFF NW # 322 FORT WALTON BEACH,FL 325484064	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$111.30 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$111.30
<b>COMPANY:</b> 547 <b>ID NO :</b> 1363-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1363 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> D & D GARAGE DOOR 1177 CATTLEMEN RD SARASOTA,FL 342322813	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1364-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1364 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> D&S APPLIANCE FL 5142 MUSTANG WAY ORLANDO,FL 328103323	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1365-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1365 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DM OLIVIERI PLUMBING AND GAS INC 6938 DUNCANSBY AVE N SAINT PETERSBURG,FL 337091444	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1366-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1366 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DR ENTERPRISES PO BOX 541016 MERRITT ISLAND,FL 329541016	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1367-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1367 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DAVE CORSO 11963 SE 72ND TERRACE RD BELLEVIEW,FL 344207612	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1368-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1368 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DAVES POOL CLEANING LLC PO BOX 35 SAFETY HARBOR,FL 346950035	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1369-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1369 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DAVID E ALBAUGH PLUMBING LLC PO BOX 2219 RIVERVIEW,FL 335682219	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,075.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,075.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1370-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1370 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DAVIS AIR & HEAT INC 13900 CR 455 UNIT 107 CLERMONT,FL 347119029	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,434.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,434.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1371-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1371 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DEEP ELECTRIC INC PO BOX 607902 ORLANDO,FL 328607902	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1372-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1372 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DEMERS PLUMBING & HEATING INC 2395 MINOT AVE PORT CHARLOTTE,FL 33981	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

**EXHIBIT A**

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1373-1	<b>CLAIM NUMBER :</b> 1373	<b>CLAIMANT :</b> DESIGN ONE GARAGE DOORS LLC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4846 SUN CITY CENTER BLVD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	# 263		
		SUN CITY CENTER,FL 335736281		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1374-1	<b>CLAIM NUMBER :</b> 1374	<b>CLAIMANT :</b> DESJARDIN ELECTRICAL SERVICE INC	<b>AMOUNT RECOMMENDED :</b>	\$40.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	13 ROBIN RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$40.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORANGE PARK,FL 320736401		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1375-1	<b>CLAIM NUMBER :</b> 1375	<b>CLAIMANT :</b> DHM REPAIR SERVICES LLC	<b>AMOUNT RECOMMENDED :</b>	\$1,276.36
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1439 NW 129TH WAY	<b>AMOUNT RECMD CLAIMANT :</b>	\$1,276.36
	<b>DATE PROOF FILED :</b> 02/19/2015	SUNRISE,FL 333232981		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1376-1	<b>CLAIM NUMBER :</b> 1376	<b>CLAIMANT :</b> DISCOUNT APPLIANCE REPAIR FL	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1120 PENDLETON CIR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	THE VILLAGES,FL 321621435		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1377-1	<b>CLAIM NUMBER :</b> 1377	<b>CLAIMANT :</b> DOBBS APPLIANCE REPAIR	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1211 2ND ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	SOUTHPORT,FL 324091317		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1378-1	<b>CLAIM NUMBER :</b> 1378	<b>CLAIMANT :</b> DOC DEANS POOLS	<b>AMOUNT RECOMMENDED :</b>	\$395.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 450171	<b>AMOUNT RECMD CLAIMANT :</b>	\$395.00
	<b>DATE PROOF FILED :</b> 02/19/2015	KISSIMMEE,FL 347450171		

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1379-1	<b>CLAIM NUMBER :</b> 1379	<b>CLAIMANT :</b> DONNIE DANIELS PLUMBING	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 490	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	INTERCESSION CITY,FL 338480490		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1380-1	<b>CLAIM NUMBER :</b> 1380	<b>CLAIMANT :</b> DONNIE DANIELS PLUMBING INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 490	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	INTERCESSION CITY,FL 338480490		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1381-1	<b>CLAIM NUMBER :</b> 1381	<b>CLAIMANT :</b> DONNYS HEATING & AIR CONDITIONING INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	400 CAPITAL CIR SE STE 18317	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	TALLAHASSEE,FL 323013802		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1382-1	<b>CLAIM NUMBER :</b> 1382	<b>CLAIMANT :</b> DONS ALL APPLIANCES + SERVICE INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4404 NW 47TH ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	TAMARAC,FL 333195824		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1383-1	<b>CLAIM NUMBER :</b> 1383	<b>CLAIMANT :</b> DOWNINGS A/C & REFRIGERATION INC	<b>AMOUNT RECOMMENDED :</b>	\$65.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3884 MARINERS DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$65.00
	<b>DATE PROOF FILED :</b> 02/19/2015	GULF BREEZE,FL 325632949		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1384-1	<b>CLAIM NUMBER :</b> 1384	<b>CLAIMANT :</b> DP & M SERVICES LLC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2607 S WOODLAND BLVD STE 222	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	DELAND,FL 327207007		

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1385-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1385 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DRAIN DOCTOR PLUMBERS INC PO BOX 1791 UMATILLA,FL 327841791	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1386-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1386 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DRIPS N PUDDLES INC FL PO BOX 743 PALMETTO,FL 342200743	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$405.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$405.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1387-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1387 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> DUNSTAN & SON PLUMBING COMPANY INC 1127 W MAIN ST LEESBURG,FL 347484926	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1388-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1388 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> E & B HEATING & A/C 868 BLOUNTSTOWN ST TALLAHASSEE,FL 323042707	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1389-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1389 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> EAU GALLIE ELECTRIC INCORPORATED 2012 AURORA RD MELBOURNE,FL 329354136	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1390-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1390 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ECONOMY APPLIANCE HEAT & AIR 4610 SAUFLEY FIELD RD PENSACOLA,FL 325261720	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$690.97 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$690.97

**EXHIBIT A**

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1391-1	<b>CLAIM NUMBER :</b> 1391	<b>CLAIMANT :</b> ELECTRICAL MECHANICAL SVS	<b>AMOUNT RECOMMENDED :</b>	\$2,440.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	5810 BRECKENRIDGE PKWY STE B	<b>AMOUNT RECMD CLAIMANT :</b>	\$2,440.00
	<b>DATE PROOF FILED :</b> 02/19/2015	TAMPA,FL 336104243		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1392-1	<b>CLAIM NUMBER :</b> 1392	<b>CLAIMANT :</b> ELITE HEATING & AIR	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	6447 33RD ST E	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	SARASOTA,FL 342434100		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1393-1	<b>CLAIM NUMBER :</b> 1393	<b>CLAIMANT :</b> EMERALD PLUMBING	<b>AMOUNT RECOMMENDED :</b>	\$184.54
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2311 HENDERSON DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$184.54
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328061901		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1394-1	<b>CLAIM NUMBER :</b> 1394	<b>CLAIMANT :</b> ESKIMO 24 HOUR A/C & REFRIGERATION INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3125 FORTUNE WAY STE 14	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WELLINGTON,FL 334148783		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1395-1	<b>CLAIM NUMBER :</b> 1395	<b>CLAIMANT :</b> ESSENTIAL APPLIANCE	<b>AMOUNT RECOMMENDED :</b>	\$278.11
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 212494	<b>AMOUNT RECMD CLAIMANT :</b>	\$278.11
	<b>DATE PROOF FILED :</b> 02/19/2015	ROYAL PALM BEACH,FL 334212494		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1396-1	<b>CLAIM NUMBER :</b> 1396	<b>CLAIMANT :</b> EXPERT APPLIANCE REPAIR SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$720.97
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	406 MADISON AVE STE 6	<b>AMOUNT RECMD CLAIMANT :</b>	\$720.97
	<b>DATE PROOF FILED :</b> 02/19/2015	ORANGE PARK,FL 320657757		

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1397-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1397 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FW FAIR PLUMBING  PO BOX 51558 JACKSONVILLE BEACH,FL 322401558	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$354.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$354.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1398-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1398 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FACILITY PRO TECH  4065 L B MCLEOD RD ORLANDO,FL 328115663	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1399-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1399 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FACILITY PRO TECH LLC FL  4065 L B MCLEOD RD STE G ORLANDO,FL 328115663	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$249.95 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$249.95
<b>COMPANY:</b> 547 <b>ID NO :</b> 1400-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1400 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FAMILY POOLS INC  873 SW SOUTH MACEDO BLVD PORT ST LUCIE,FL 349831815	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$455.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$455.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1401-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1401 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FANTASY POOLS OF NORTH FLORIDA  238 OLD HARD RD FLEMING ISLAND,FL 320037910	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1402-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1402 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FIRST CLASS AC & APPLIANCE INC  4450 SW 61ST AVE STE 6 DAVIE,FL 333143627	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,126.38 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,126.38

**EXHIBIT A**

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1403-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1403 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FLETCHER PLUMBING INC 7060 SW 19TH PL OCALA,FL 344746461	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1404-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1404 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FLORIDA GARAGE DOOR COMPANY PO BOX 6194 BOCA RATON,FL 33427	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$25.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$25.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1405-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1405 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FORCE ELECTRIC 4110 E 11TH AVE TAMPA,FL 336054526	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1406-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1406 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FRANK GAY PLUMBING FL 6206 FOREST CITY RD ORLANDO,FL 328104803	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1407-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1407 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FRANKS HEATING & COOLING INC 121 CORPORATION WAY UNIT F VENICE,FL 342855508	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$140.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$140.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1408-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1408 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> FRIENDLY APPLIANCE SERVICE 7749 NORMANDY BLVD # 145-233 JACKSONVILLE,FL 322217657	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$618.20 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$618.20

## EXHIBIT A



SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1409-1	<b>CLAIM NUMBER :</b> 1409	<b>CLAIMANT :</b> FRIENDLY HOME SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$62.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 566323	<b>AMOUNT RECMD CLAIMANT :</b>	\$62.00
	<b>DATE PROOF FILED :</b> 02/19/2015	MIAMI,FL 332566323		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1410-1	<b>CLAIM NUMBER :</b> 1410	<b>CLAIMANT :</b> FROSTYS AIR CONDITIONING	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	8906 EAGLE WATCH DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	RIVERVIEW,FL 335784992		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1411-1	<b>CLAIM NUMBER :</b> 1411	<b>CLAIMANT :</b> G & M USED APPLIANCE	<b>AMOUNT RECOMMENDED :</b>	\$41.78
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1063 MASON AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$41.78
	<b>DATE PROOF FILED :</b> 02/19/2015	DAYTONA BEACH,FL 321174611		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1412-1	<b>CLAIM NUMBER :</b> 1412	<b>CLAIMANT :</b> G & T ELECTRICAL CO	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	9550 NW 12TH ST STE 15	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	DORAL,FL 331722831		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1413-1	<b>CLAIM NUMBER :</b> 1413	<b>CLAIMANT :</b> GES REFRIGERATION INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	11250 OLD ST AUGUSTINE RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	STE 15-327 JACKSONVILLE,FL 322571088		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1414-1	<b>CLAIM NUMBER :</b> 1414	<b>CLAIMANT :</b> GARAGE DOORS OVER CHARLOTTE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	18200 PAULSON DR UNIT 6	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PORT CHARLOTTE,FL 339541032		

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1415-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1415 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GAS APPLIANCE SPECIALISTS INC  4007 SAN BERNADO DR JACKSONVILLE,FL 322174651	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1416-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1416 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GEMBECKI PLUMBING  PO BOX 180215 CASSELBERRY,FL 327180215	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$65.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$65.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1417-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1417 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GENERAL ENTERPRISES OF SW FL  2240 TRADE CENTER WAY NAPLES,FL 341092019	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1418-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1418 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GENERAL REPAIR SERVICE  5750 EFFIE DR APOPKA,FL 327125116	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1419-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1419 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GLYNS APPLIANCE SERVICE  12891 SW 91ST CT MIAMI,FL 331765857	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1420-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1420 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GORDONSS REPAIR  2319 CORAL POINT DR CAPE CORAL,FL 339903812	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$165.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$165.00

**EXHIBIT A**

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1421-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1421 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GRACE PLUMBING INC 198 HUMPHREY RD LAKE MARY,FL 327463834	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1422-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1422 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GREENS HVAC SOLUTIONS INC 12791 SE 80TH ST MORRISTON,FL 326685031	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$169.50 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$169.50
<b>COMPANY:</b> 547 <b>ID NO :</b> 1423-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1423 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GRIFS 3824 MISTY WAY DESTIN,FL 325412124	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1424-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1424 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GROVE BOYS POOL SERVICES INC PO BOX 293153 DAVIE,FL 333293153	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1425-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1425 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GRP CORP DBA GORDONS POOL & SPA SERVICE 1520 SE 46TH LN STE A CAPE CORAL,FL 339048683	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1426-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1426 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GULFSHORE AIR CONDITIONING AND HEATING 4201 WARD COVE DR NICEVILLE,FL 325787145	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

**EXHIBIT A**

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1427-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1427 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> GUNN APPLIANCER SERVICE INC 8362 PINES BLVD # 402 PEMBROKE PINES,FL 330246600	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1428-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1428 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> H & W HEATING & AIR 26 TUPELO AVE SE FORT WALTON BEACH,FL 325485415	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1429-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1429 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> H GARAGE DOORS INC 5601 NW 8TH ST BAY #50 MARGATE,FL 33063	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1430-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1430 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HAMMOND AIR CONDITIONING INC 3412 GALILEE RD JACKSONVILLE,FL 322074718	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$683.22 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$683.22
<b>COMPANY:</b> 547 <b>ID NO :</b> 1431-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1431 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HANDYMAN HEADQUATERS LLC 11471 W SAMPLE RD STE 29 CORAL SPRINGS,FL 330657048	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1432-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1432 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HARTMANS APPLIANCE REPAIR 3310 EVERETT ST APOPKA,FL 327036000	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$20.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$20.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1433-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1433 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HARVEY BAKER PLUMBING 3700 OAKVIEW DR ORLANDO,FL 328127537	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1434-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1434 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HASKINS PLUMBING INC 17088 FLYING FISH LN SUGARLOAF KEY,FL 330423629	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1435-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1435 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HAWKINS DOOR SERVICE PO BOX 15734 CLEARWATER,FL 337665734	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$5.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$5.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1436-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1436 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HC THE POOL STORE 407 US HIGHWAY 17 92 W STE B HAINES CITY,FL 338445000	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$455.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$455.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1437-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1437 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HERZERS PLUMBING SERVICE INC PO BOX 422 ORANGE PARK,FL 320670422	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$105.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$105.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1438-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1438 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HIGH PERFORMANCE PLUMBING SERVICES 4450 MORRIS ST N ST PETERSBURG,FL 337143739	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,042.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,042.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1439-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1439 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HI TECH PLUMBING 1000 STINSON WAY STE 111 WEST PALM BEACH,FL 334113733	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1440-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1440 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HOME SOLUTIONS APPLIANCE SERVICE 1517 OAKFIELD DR BRANDON,FL 335114856	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$426.07 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$426.07
<b>COMPANY:</b> 547 <b>ID NO :</b> 1441-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1441 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HOME SOLUTIONS OF BRANDON INC 1517 OAKFIELD DR BRANDON,FL 335114856	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1442-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1442 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HONEST APPLIANCE REPAIR 6910 E BAY BLVD NAVARRE,FL 325668902	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1443-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1443 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HOWARD ELECTRICAL SERVICES 719 FRUIT COVE DR E JACKSONVILLE,FL 322593806	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1444-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1444 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> HULA POOLS INC 15740 73RD TER N WEST PALM BEACH,FL 334187408	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1445-1	<b>CLAIM NUMBER :</b> 1445	<b>CLAIMANT :</b> HUNTER ELECTRICAL SERVICES INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	901 APRICOT AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	SARASOTA,FL 342372803		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1446-1	<b>CLAIM NUMBER :</b> 1446	<b>CLAIMANT :</b> HUNTER HEATING & AIR	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	11205 NW 15TH PL	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	GAINESVILLE,FL 326065450		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1447-1	<b>CLAIM NUMBER :</b> 1447	<b>CLAIMANT :</b> HYATT AIR CONDITIONING & REFRIGERATION	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3825 INVESTMENT LN STE 7	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	RIVIERA BEACH,FL 334041793		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1448-1	<b>CLAIM NUMBER :</b> 1448	<b>CLAIMANT :</b> IN PHAZE ELECTRIC	<b>AMOUNT RECOMMENDED :</b>	\$150.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3745 CORD AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$150.00
	<b>DATE PROOF FILED :</b> 02/19/2015	SAINT CLOUD,FL 347728197		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1449-1	<b>CLAIM NUMBER :</b> 1449	<b>CLAIMANT :</b> INMAN PLUMBING	<b>AMOUNT RECOMMENDED :</b>	\$88.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1900 28TH ST N	<b>AMOUNT RECMD CLAIMANT :</b>	\$88.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ST PETERSBURG,FL 33713		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1450-1	<b>CLAIM NUMBER :</b> 1450	<b>CLAIMANT :</b> INVICTA REPAIR SERVICES	<b>AMOUNT RECOMMENDED :</b>	\$256.30
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3763 KOSTEN PL	<b>AMOUNT RECMD CLAIMANT :</b>	\$256.30
	<b>DATE PROOF FILED :</b> 02/19/2015	SARASOTA,FL 342409632		

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1451-1	<b>CLAIM NUMBER :</b> 1451	<b>CLAIMANT :</b> IS APPLIANCE REPAIR	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	14566 CAMBERWELL LN S	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322581706		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1452-1	<b>CLAIM NUMBER :</b> 1452	<b>CLAIMANT :</b> J & E WATER SERVICES INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1228 S HOPKINS AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	TITUSVILLE,FL 327804209		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1453-1	<b>CLAIM NUMBER :</b> 1453	<b>CLAIMANT :</b> J & M APPLIANCE REPAIR	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	8604 DANDY AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322117931		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1454-1	<b>CLAIM NUMBER :</b> 1454	<b>CLAIMANT :</b> JM TECHNICAL SERVICE AND REPAIR	<b>AMOUNT RECOMMENDED :</b>	\$615.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1601 SW 120TH AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$615.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PEMBROKE PINES,FL 33025		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1455-1	<b>CLAIM NUMBER :</b> 1455	<b>CLAIMANT :</b> JTE ELECTRICAL	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	6633 HARTLAND ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	FORT MYERS,FL 339661231		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1456-1	<b>CLAIM NUMBER :</b> 1456	<b>CLAIMANT :</b> JDS HEATING & AIR CONDITIONING INC	<b>AMOUNT RECOMMENDED :</b>	\$165.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	770 LAKE KATHRYN CIR	<b>AMOUNT RECMD CLAIMANT :</b>	\$165.00
	<b>DATE PROOF FILED :</b> 02/19/2015	CASSELBERRY,FL 327072718		

EXHIBIT A



FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1457-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1457 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> JERRY PYBUS ELECTRIC PO BOX 6500 PANAMA CITY,FL 32404	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1458-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1458 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> JIM BENNETTS PLUMBING INC 3402 APALACHEE PKWY TALLAHASSEE,FL 323115335	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$596.50 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$596.50
<b>COMPANY:</b> 547 <b>ID NO :</b> 1459-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1459 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> JIM CROSBY PLUMBING PO BOX 2374 TALLAHASSEE,FL 323162374	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1460-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1460 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> JOHN MISLOW PLUMBING 621 SW 21ST TER STE 4 FT LAUDERDALE,FL 333122209	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$250.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$250.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1461-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1461 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> JOHN PLAMER ELECTRIC INC 5 S PROSPECT AVE AVON PARK,FL 338253634	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$55.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$55.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1462-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1462 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> JOHNSON BROTHERS PLUMBING INC PO BOX 938 OCALA,FL 344780938	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

**EXHIBIT A**

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1463-1	<b>CLAIM NUMBER :</b> 1463	<b>CLAIMANT :</b> JTE ELECTRIC INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	6633 HARTLAND ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	FORT MYERS,FL 339661231		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1464-1	<b>CLAIM NUMBER :</b> 1464	<b>CLAIMANT :</b> JULIUS GRAHAM INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	5477 SE RAILWAY AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	STUART,FL 349979107		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1465-1	<b>CLAIM NUMBER :</b> 1465	<b>CLAIMANT :</b> KAISER BROS HEATING & AIR COND INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2929 9TH ST W	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	BRADENTON,FL 342056958		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1466-1	<b>CLAIM NUMBER :</b> 1466	<b>CLAIMANT :</b> KATZ PLUMBING	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	901 LEELAND HEIGHTS BLVD W	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LEHIGH ACRES,FL 339366623		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1467-1	<b>CLAIM NUMBER :</b> 1467	<b>CLAIMANT :</b> KEITH MCNEILL PLUMBING CONT INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3505 N MONROE ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	TALLAHASSEE,FL 323032744		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1468-1	<b>CLAIM NUMBER :</b> 1468	<b>CLAIMANT :</b> KELSON PLUMBING	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	5810 PENNY AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PENSACOLA,FL 325047318		

## EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1469-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1469 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> KEMPTON & SELF PLUMBING SERVICE  PO BOX 1274 ARCHER,FL 326181274	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1470-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1470 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> KEN & CARRIES BEACH PLUMBING & SUPPLIES  10 FRANCIS ST COCOA BEACH,FL 329312320	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1471-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1471 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> KENS APPLIANCE REPAIR  7242 MAGNOLIA VALLEY DR NEW PORT RICHEY,FL 346532420	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1472-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1472 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> KWIK FIX PLUMBING  4635 EMERSON ST JACKSONVILLE,FL 322074920	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$580.50 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$580.50
<b>COMPANY:</b> 547 <b>ID NO :</b> 1473-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1473 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> L & R  PO BOX 520845 LONGWOOD,FL 327520845	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1474-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1474 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> L B  7101 BUDAPEST WAY ORLANDO,FL 328224615	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$600.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$600.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1475-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1475 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LJ ROSSI ELECTRIC 3920 QUARTER HORSE WAY LAKE WALES,FL 338987690	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$188.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$188.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1476-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1476 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LAGASSE POOL CONSTRUCTION 2877 W BROWARD BLVD FORT LAUDERDALE,FL 333121289	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1477-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1477 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LAGROW IRRIGATION & WELL DRILLING PO BOX 7605 SEBRING,FL 338720111	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1478-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1478 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LARA AIR INV 3180 MANDEVILLE ST DELTONA,FL 327382191	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$561.95 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$561.95
<b>COMPANY:</b> 547 <b>ID NO :</b> 1479-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1479 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LEAKING POOLS INC PO BOX 805 ESTERO,FL 339290805	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1480-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1480 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LEE MECHANICAL + PLUMBING 1765 E NINE MILE RD STE 1-277 PENSACOLA,FL 325145479	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$42.85 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$42.85

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1481-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1481 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LEPRECHAUN PLUMBING 7567 FREMONT AVE KEYSTONE HEIGHTS,FL 326568329	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1482-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1482 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LEW GIORGINO APPLIANCE REPAIR 3361 RAMBLEWOOD DR N SARASOTA,FL 342373822	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$75.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$75.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1483-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1483 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LIGHTHOUSE ELECTRICAL CONTRACTORS INC 2345 URBAN RD JACKSONVILLE,FL 322104248	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$205.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$205.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1484-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1484 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LINDSEY & GREGORY SOUFLERIS 1246 STONEHAVEN CT HEATHROW,FL 327465344	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1485-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1485 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LITTLE BUCKS APPLIANCE SALES 2332 EDGEWOOD AVE N JACKSONVILLE,FL 322541725	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$267.50 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$267.50
<b>COMPANY:</b> 547 <b>ID NO :</b> 1486-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1486 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> LLONA PLUMBING INC PO BOX 4479 TAMPA,FL 336774479	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1487-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1487 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MACS ELECTRICAL WORKS INC  10853 ARROWTREE BLVD CLERMONT,FL 347156704	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1488-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1488 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MADDENAIRE INC  PO BOX 60335 JACKSONVILLE,FL 322360335	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1489-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1489 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MARK E STIRRUP PLUMBING INC  PO BOX 611146 MIAMI,FL 332611146	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1490-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1490 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MARKO DOOR PRODUCTS  5320 W STATE ROAD 84 DAVIE,FL 333141239	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1491-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1491 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MARTINS FAMILY APPLIANCE  1809 N MAIN ST GAINESVILLE,FL 326098607	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1492-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1492 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MARTINS MAINTENANCE PLUS COMPANY  6580 SEMINOLE BLVD LOT 424 SEMINOLE,FL 337726322	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

**EXHIBIT A**

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1493-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1493 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MASCO APPLIANCE AND AIR CONDITIONING 5586 NW 31ST AVE FT LAUDERDALE,FL 333092508	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,266.97 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,266.97
<b>COMPANY:</b> 547 <b>ID NO :</b> 1494-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1494 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MASTERS PLUMBING AND SEPTIC INC 1767 LAKEWOOD RANCH BLVD # 250 BRADENTON,FL 342114906	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$630.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$630.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1495-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1495 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MCCONNELL AIR CONDITIONING INC PO BOX 835145 HOLLYWOOD,FL 33083	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1496-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1496 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MD CAUTHEN 661 ELLSWORTH WAY THE VILLAGES,FL 32162	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$138.99 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$138.99
<b>COMPANY:</b> 547 <b>ID NO :</b> 1497-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1497 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MEDS POOL SERVICE 1274 BLANDING BLVD ORANGE PARK,FL 320658014	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$341.42 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$341.42
<b>COMPANY:</b> 547 <b>ID NO :</b> 1498-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1498 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MEEKS PLUMBING INC 12340 SE US HIGHWAY 441 BELLEVIEW,FL 344204549	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1499-1	<b>CLAIM NUMBER :</b> 1499	<b>CLAIMANT :</b> MELS APPLIANCE SERVICE FL	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3179 IVERSON ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PORT CHARLOTTE,FL 339527102		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1500-1	<b>CLAIM NUMBER :</b> 1500	<b>CLAIMANT :</b> METRO AIR	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	10780 75TH ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LARGO,FL 337771403		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1501-1	<b>CLAIM NUMBER :</b> 1501	<b>CLAIMANT :</b> METRO ROOTER	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	8892 NORMANDY BLVD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322216239		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1502-1	<b>CLAIM NUMBER :</b> 1502	<b>CLAIMANT :</b> MICHAELS PLUMBING OF CENTRAL FLORIDA	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 574597	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328574597		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1503-1	<b>CLAIM NUMBER :</b> 1503	<b>CLAIMANT :</b> MICHAELS POOLS SERVICE AND REPAIRS INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 342099	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	TAMPA,FL 336942099		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1504-1	<b>CLAIM NUMBER :</b> 1504	<b>CLAIMANT :</b> MICKEYS PLUMBING INC	<b>AMOUNT RECOMMENDED :</b>	\$202.50
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1126 OLD OKEECHOBEE RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$202.50
	<b>DATE PROOF FILED :</b> 02/19/2015	WEST PALM BEACH,FL 334016943		

## EXHIBIT A



SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1505-1	<b>CLAIM NUMBER :</b> 1505	<b>CLAIMANT :</b> MIKE BOYKIN AIR CONDITONING & HEATING CO	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	5437 MORSE AVE # 1	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322443917		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1506-1	<b>CLAIM NUMBER :</b> 1506	<b>CLAIMANT :</b> MIKES PLUMBING FL	<b>AMOUNT RECOMMENDED :</b>	\$25.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4595 TOLLEFSON AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$25.00
	<b>DATE PROOF FILED :</b> 02/19/2015	NORTH PORT,FL 342872807		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1507-1	<b>CLAIM NUMBER :</b> 1507	<b>CLAIMANT :</b> MILLERS CENTRAL AIR INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	20 W INTERLAKE BLVD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LAKE PLACID,FL 338529481		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1508-1	<b>CLAIM NUMBER :</b> 1508	<b>CLAIMANT :</b> MONAHANS PLUMBING	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1616 CAPE CORAL PKWY W STE 102	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	CAPE CORAL,FL 339148911		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1509-1	<b>CLAIM NUMBER :</b> 1509	<b>CLAIMANT :</b> MORGAN AIR CONDITIONING	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	14807 N 12TH ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LUTZ,FL 335493508		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1510-1	<b>CLAIM NUMBER :</b> 1510	<b>CLAIMANT :</b> MR APPLIANCE (TAMPA)	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1202 TECH BLVD STE 204	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	TAMPA,FL 336197864		

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1511-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1511 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MR APPLIANCE OF CAPE CORAL 10241 METRO PKWY STE 107 FORT MYERS,FL 339661028	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$34.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$34.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1512-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1512 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MR FIX IT 2319 CORAL POINT DR CAPE CORAL,FL 339903812	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$150.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$150.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1513-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1513 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MR ROGER APPLIANCES 3125 W. HILLSBOROUGH AVE TAMPA,FL 33614	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1514-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1514 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MUNNS SALES & SERVICE PO BOX 430 FRUITLAND PARK,FL 347310430	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$187.86 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$187.86
<b>COMPANY:</b> 547 <b>ID NO :</b> 1515-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1515 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MUTH & SONS PLUMBING 708 N COVE BLVD PANAMA CITY,FL 324013504	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1516-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1516 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MY CLEAN POOL PO BOX 381 WINDERMERE,FL 347860381	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$455.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$455.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1517-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1517 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> MYSTIC WATERS & POOL SERVICES LLC 3047 SAINT JOHNS BLUFF RD S STE 9 JACKSONVILLE,FL 322463711	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$157.30 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$157.30
<b>COMPANY:</b> 547 <b>ID NO :</b> 1518-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1518 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> NATES A/C APPLIANCE REPAIR PO BOX 350 BRANDON,FL 335090350	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,099.31 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,099.31
<b>COMPANY:</b> 547 <b>ID NO :</b> 1519-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1519 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> NATIVE PLUMBING 13640 WESLEYAN BLVD ORLANDO,FL 328264978	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$180.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$180.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1520-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1520 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> NEALS REFRIGERATION INC 6350 SE LAKE CIRCLE DR STUART,FL 349976347	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$600.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$600.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1521-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1521 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> NEESE IRRIGATION INC PO BOX 620927 OVIEDO,FL 327620927	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$55.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$55.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1522-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1522 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> NELSONS APPLIANCE 303 CHEROKEE TRL PENSACOLA,FL 325063515	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1523-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1523 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> NESPA ELECTRIC INC 7909 VENTURE CENTER WAY APT 9212 BOYNTON BEACH,FL 334377412	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$20.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$20.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1524-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1524 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> NORTH COUNTY PLUMBING 9056 N MILITARY TRL STE 1 PALM BEACH GARDENS,FL 334105970	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$555.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$555.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1525-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1525 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> NORTH FLORIDA DOOR CONTROL LLC 4318 SW 50TH ST GAINESVILLE,FL 326083802	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1526-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1526 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> NORTHEAST FLORIDA HEATING & AIR 541 PERMENTO AVE S JACKSONVILLE,FL 322203448	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$142.73 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$142.73
<b>COMPANY:</b> 547 <b>ID NO :</b> 1527-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1527 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> NORTHWEST POOL SUPPLY LLC 1183 JOHN SIMS PKWY E NICEVILLE,FL 325782752	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$366.83 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$366.83
<b>COMPANY:</b> 547 <b>ID NO :</b> 1528-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1528 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ONE TOUCH HEATING & COOLING INC 8249 103RD ST JACKSONVILLE,FL 322106553	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1529-1	<b>CLAIM NUMBER :</b> 1529	<b>CLAIMANT :</b> OPTIMIM PLUMBING LLC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	18145 LEAMINGTON LN	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LAND O LAKES,FL 346388148		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1530-1	<b>CLAIM NUMBER :</b> 1530	<b>CLAIMANT :</b> OVERHEAD DOOR COMPANY OF SARASOTA	<b>AMOUNT RECOMMENDED :</b>	\$399.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1249 STRINGFIELD AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$399.00
	<b>DATE PROOF FILED :</b> 02/19/2015	SARASOTA,FL 342373037		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1531-1	<b>CLAIM NUMBER :</b> 1531	<b>CLAIMANT :</b> PACKS PLUMBING INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1855 NEAL RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ST AUGUSTINE,FL 320841136		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1532-1	<b>CLAIM NUMBER :</b> 1532	<b>CLAIMANT :</b> PAGE AIR LLC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1420 SATURN ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	MERRITT ISLAND,FL 329533129		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1533-1	<b>CLAIM NUMBER :</b> 1533	<b>CLAIMANT :</b> PALMS POOL SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	6140 MICHAEL ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JUPITER,FL 334586681		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1534-1	<b>CLAIM NUMBER :</b> 1534	<b>CLAIMANT :</b> PANZER INC	<b>AMOUNT RECOMMENDED :</b>	\$353.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3677 23RD AVE S STE B103	<b>AMOUNT RECMD CLAIMANT :</b>	\$353.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LAKE WORTH,FL 334613264		

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1535-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1535 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PARADISE POOL  19527 INDIAN MOUND DR SUGARLOAF KEY,FL 330423135	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1536-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1536 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PARKER AIRE  3901 3RD ST W LEHIGH ACRES,FL 339711811	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,198.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,198.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1537-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1537 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PAULS AIR INC  4665 LAKE WASHINGTON RD MELBOURNE,FL 329347660	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1538-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1538 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PEARLIE MOORE  1385 RAINBOW RD TALLAHASSEE,FL 323057223	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1539-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1539 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PEBBLE POOLS LLC  4401 ASHTON RD SARASOTA,FL 342332269	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1540-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1540 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PERFORMANCE PLUMBING SERVICE INC  13149 NW 171ST PL REDDICK,FL 326862435	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

**EXHIBIT A**

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1541-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1541 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PILOT POOL SERVICE 6039 PINE HILL RD PORT RICHEY,FL 346686735	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1542-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1542 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PINCH A PENNY 170 TUSKAWILLA RD WINTER SPRINGS,FL 327083715	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$509.50 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$509.50
<b>COMPANY:</b> 547 <b>ID NO :</b> 1543-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1543 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PINCKARD GARAGE DOORS INC 5489 WOODBINE RD PACE,FL 325718722	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1544-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1544 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PLUMB BETTER 314 W 8TH ST PANAMA CITY,FL 324012542	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1545-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1545 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PLUMBER JOHN 312 E VENICE AVE STE 122 VENICE,FL 342854671	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1546-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1546 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> POOL MAGICIAN INC 2300 WHITFIELD PARK DR UNIT K13 SARASOTA,FL 342434076	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1547-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1547 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> POOL SOLUTIONS 5510 SW 41ST BLVD STE 204 GAINESVILLE,FL 326084975	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1548-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1548 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> POOLXPPTS OF PARKLAND INC 3809 CRESTWOOD DR VALRICO,FL 335966034	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1549-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1549 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> POWELL AC & HEAT 215 S 3RD ST EAGLE LAKE,FL 338393301	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$30.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$30.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1550-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1550 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PREMIER PLUMBING & AIR LLC 108 NE DIXIE HWY STUART,FL 349941842	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1551-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1551 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PREMIER REFRIGERATION INC PO BOX 12070 JACKSONVILLE,FL 322090070	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1552-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1552 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PRESCOTT & ASSOCIATES INC PO BOX 2400 EATON PARK,FL 338402400	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A



SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1553-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1553 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PRESTO AIR LLC 1181 S SUMTER BLVD # 303 NORTH PORT,FL 342872335	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1554-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1554 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PRESTON LINK ELECTRIC INC 4000 SW 35TH TER GAINESVILLE,FL 326082521	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1555-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1555 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PRIME PLUMBING INC 4201 W OLD US HIGHWAY 441 # B/1 MOUNT DORA,FL 327573269	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1556-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1556 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PROFESSIONAL PLUMBING DESIGN 4450 MIDDLE AVE SARASOTA,FL 342342113	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$169.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$169.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1557-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1557 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PRO TECH APPLIANCES 3600 OLEANDER AVE FORT PIERCE,FL 349826502	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1558-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1558 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> PUR PLUMBING INC 2413 BAYSHORE BLVD UNIT 802 TAMPA,FL 336297390	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1559-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1559 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> QUALIFIED SERVICE SYSTEMS 10125 W OAKLAND PARK BLVD # 413 SUNRISE,FL 333516917	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$129.58 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$129.58
<b>COMPANY:</b> 547 <b>ID NO :</b> 1560-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1560 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> QUALITY APPLIANCE SERVICES 13020 BELCHER RD S LARGO,FL 337731639	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$992.24 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$992.24
<b>COMPANY:</b> 547 <b>ID NO :</b> 1561-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1561 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> QUALITY GARAGE DOOR SERVICE 116 S PARK AVE TITUSVILLE,FL 327963361	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,543.95 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,543.95
<b>COMPANY:</b> 547 <b>ID NO :</b> 1562-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1562 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RJ KIELTY PLUMBING INC 9507 STATE ROAD 52 HUDSON,FL 346693002	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1563-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1563 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RL KAYLOR AIR CONDITIONING & HEATING 6388 BELVEDERE RD WEST PALM BEACH,FL 334131004	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1564-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1564 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RAMBS APPLIANCE REPAIR PO BOX 520845 LONGWOOD,FL 327520845	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1565-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1565 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RANDY POULETTE AIR CONDITIONING LLC 13964 SHEFFIELD CT WELLINGTON,FL 334147658	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$120.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$120.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1566-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1566 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RAPID ROOTER FL PO BOX 1117 POMPANO BEACH,FL 330611117	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1567-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1567 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RAYS APPLIANCE 318 S FRENCH AVE SANFORD,FL 327711168	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1568-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1568 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RELIABLE APPLIANCE REPAIR 3938 CLAREMONT DR NEW PORT RICHEY,FL 346525607	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1569-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1569 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RICHARD A JONES ELECTRIC INC 204 N OLD DIXIE HWY JUPITER,FL 334584984	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$148.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$148.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1570-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1570 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RIGHT WAY PLUMBING CO 1329 SHOTGUN RD SUNRISE,FL 333261935	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1571-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1571 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RIPLEYS APPLIANCE REPAIR  1475 30TH ST NICEVILLE,FL 32578	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$181.58 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$181.58
<b>COMPANY:</b> 547 <b>ID NO :</b> 1572-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1572 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ROBERT LANIER HANDYMAN SERVICES  9536 PRINCETON SQUARE BLVD S APT 1304 JACKSONVILLE,FL 322568352	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1573-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1573 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ROBERTS APPLIANCE REPAIR  18 SHADOW LN APALACHICOLA,FL 323201830	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$100.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$100.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1574-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1574 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RODNEY QUICK ENTERPRICE LLC  661 ROBINSON FARMS RD TALLAHASSEE,FL 323178946	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1575-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1575 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ROME AIRE SERVICES INC  1701 COSTA DEL SOL BOCA RATON,FL 334321751	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1576-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1576 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RON IERNAS HEATING  19121 N US HWY 41 LUTZ,FL 335494258	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

**EXHIBIT A**

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1577-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1577 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RONICKI PLUMBING 4100 ORDNANCE RD LEHIGH ACRES,FL 339715623	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1578-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1578 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ROSS PLUMBING 930 THOMAS AVE LEESBURG,FL 347483629	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1579-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1579 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RUBYS REPAIR SERVICE PO BOX 5339 TITUSVILLE,FL 327835339	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1580-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1580 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> RYANS HEATING & COOLING 740 SW MCCALL RD PORT ST LUCIE,FL 349533928	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1581-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1581 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SAM HANDYMAN INC 2390 ALBURY AVE DELTONA,FL 32738	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1582-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1582 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SAMM ELECTRIC PO BOX 410 DEFUNIAK SPRINGS,FL 324350410	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$125.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$125.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1583-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1583 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SANZ APPLIANCE REPAIR  10223 FALCON PINE BLVD APT 206 ORLANDO,FL 328297383	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$220.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$220.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1584-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1584 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SARASOTA APPLIANCE SERVICE CORP  2452 GULF GATE DR SARASOTA,FL 342315729	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$111.21 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$111.21
<b>COMPANY:</b> 547 <b>ID NO :</b> 1585-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1585 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SCOTT AIR OF FLORIDA INC  9556 HISTORIC KINGS RD S STE 306 JACKSONVILLE,FL 322572012	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$511.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$511.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1586-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1586 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SEAL TITE PLUMBING CO  PO BOX 675 BOYNTON BEACH,FL 334250675	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$522.67 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$522.67
<b>COMPANY:</b> 547 <b>ID NO :</b> 1587-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1587 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SEMORAN DOOR INC FL  PO BOX 822 APOPKA,FL 327040822	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1588-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1588 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SERVICE ONE PLUMBING & MECH INC  18 N RING AVE TARPON SPRINGS,FL 346894304	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

**EXHIBIT A**

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1589-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1589 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SHORE APPLIANCE 1241 ORANGE AVE NOKOMIS,FL 342752239	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1590-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1590 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SHRADERS APPLIANCE REPAIR 10810 TRAILS END LAKELAND,FL 338094982	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1591-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1591 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SIGNATURE POOLS 8818 COMMODITY CIR STE 43 ORLANDO,FL 328199067	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$357.30 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$357.30
<b>COMPANY:</b> 547 <b>ID NO :</b> 1592-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1592 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SIMPLY BLUE POOLS LLC 1619 SEMINARY ST KEY WEST,FL 330403508	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1593-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1593 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SMS4U PO BOX 950936 LAKE MARY,FL 327950936	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$210.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$210.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1594-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1594 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SNELL AIR CONDITIONING INC 1449 BANKS RD MARGATE,FL 330633963	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$125.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$125.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1595-1	<b>CLAIM NUMBER :</b> 1595	<b>CLAIMANT :</b> SOORSMA HEAT & AIR	<b>AMOUNT RECOMMENDED :</b>	\$227.50
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	603 15TH ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$227.50
	<b>DATE PROOF FILED :</b> 02/19/2015	DAYTONA BEACH,FL 321172001		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1596-1	<b>CLAIM NUMBER :</b> 1596	<b>CLAIMANT :</b> SOUTHERN COAST ELECTRICAL SERVICES	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3809 AUSTRALIAN CT	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WEST PALM BEACH,FL 334073911		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1597-1	<b>CLAIM NUMBER :</b> 1597	<b>CLAIMANT :</b> SOUTHERN COMFORT SOLUTIONS INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	16215 SW 117TH AVE UNIT 3	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	MIAMI,FL 331771637		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1598-1	<b>CLAIM NUMBER :</b> 1598	<b>CLAIMANT :</b> SOUTHERN PLUMBING INC	<b>AMOUNT RECOMMENDED :</b>	\$58.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4069 43RD AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$58.00
	<b>DATE PROOF FILED :</b> 02/19/2015	VERO BEACH,FL 329601809		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1599-1	<b>CLAIM NUMBER :</b> 1599	<b>CLAIMANT :</b> SOUTHERN PROFESSIONAL REPAIR SERVICES IN	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	913 DIXIE MAID LN	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	VALRICO,FL 335944114		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1600-1	<b>CLAIM NUMBER :</b> 1600	<b>CLAIMANT :</b> SPECIALTY PRODUCTS INC	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2325 W CERVANTES ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PENSACOLA,FL 325057148		

## EXHIBIT A



SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1601-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1601 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SPRINKLER REPAIR INC  1782 OTISCO WAY WINTER SPRINGS,FL 327085522	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$157.49 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$157.49
<b>COMPANY:</b> 547 <b>ID NO :</b> 1602-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1602 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> ST JOHNS HEATING AND AIR COND INC  42 CENTER ST ST AUGUSTINE,FL 320840494	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$140.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$140.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1603-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1603 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> STAR BRITE POOL SERVICE  4613 N UNIVERSITY DR # 166 CORAL SPRINGS,FL 330674602	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1604-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1604 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> STARLITE POOL BUILDERS INC  10875 NW 52ND ST STE 8 SUNRISE,FL 333518086	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$159.04 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$159.04
<b>COMPANY:</b> 547 <b>ID NO :</b> 1605-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1605 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> STEEG PLUMBING CO INC  PO BOX 330536 ATLANTIC BEACH,FL 322330536	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,465.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,465.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1606-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1606 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> STELLA MANAGEMENT LLC  1000 W HORATIO ST APT 307 TAMPA,FL 336062665	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$180.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$180.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1607-1	<b>CLAIM NUMBER :</b> 1607	<b>CLAIMANT :</b> STEVES APPLIANCE FL	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	9421 MIGUE CIR	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	PORT CHARLOTTE,FL 339813168		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1608-1	<b>CLAIM NUMBER :</b> 1608	<b>CLAIMANT :</b> SUN COAST COOLING & HEATING LLC	<b>AMOUNT RECOMMENDED :</b>	\$1,616.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	628 WESTON RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$1,616.00
	<b>DATE PROOF FILED :</b> 02/19/2015	LEHIGH ACRES,FL 339367551		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1609-1	<b>CLAIM NUMBER :</b> 1609	<b>CLAIMANT :</b> SUNAIR COOLING	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	430 ANSIN BLVD STE M	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	HALLANDALE BEACH,FL 330093112		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1610-1	<b>CLAIM NUMBER :</b> 1610	<b>CLAIMANT :</b> SUNSHINE HEATING & AIR CONDITIONING	<b>AMOUNT RECOMMENDED :</b>	\$605.30
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1606 ABER RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$605.30
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328076212		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1611-1	<b>CLAIM NUMBER :</b> 1611	<b>CLAIMANT :</b> SUNSHINE IRRIGATION	<b>AMOUNT RECOMMENDED :</b>	\$165.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	PO BOX 678914	<b>AMOUNT RECMD CLAIMANT :</b>	\$165.00
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328678914		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1612-1	<b>CLAIM NUMBER :</b> 1612	<b>CLAIMANT :</b> SUNSHINE PLUMBING AND GAS	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	9950 NE 118TH TER	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	BRONSON,FL 326217710		

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1613-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1613 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SUNSHINE PLUMBING SYSTEMS  505 TIMBERS XING LYNN HAVEN,FL 324444396	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$75.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$75.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1614-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1614 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SUPERIOR AIR CONDITIONING COMPANY  PO BOX 19527 PANAMA CITY BEACH,FL 324171527	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$127.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$127.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1615-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1615 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SUPERIOR DOORS & WINDOWS  3800 N COCOA BLVD COCOA,FL 329265906	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1616-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1616 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> SUPERIOR HEATING & COOLING  5858 WINDRIDGE DR WINTER HAVEN,FL 338818734	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1617-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1617 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> TARPON DOCK AIR CONDITIONING  PO BOX 1730 PANAMA CITY,FL 324021730	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1618-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1618 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> TEMPTROR SERVICE LLC FL  PO BOX 1531 GULF BREEZE,FL 325621531	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1619-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1619 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> TENDER PLUMBING CARE INC  PO BOX 150097 ALTAMONTE SPRINGS,FL 327150097	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$98.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$98.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1620-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1620 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> THE APPLIANCE GUY LLC  3409 W COUNTY HIGHWAY 30A SANTA ROSA BEACH,FL 324594597	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$154.60 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$154.60
<b>COMPANY:</b> 547 <b>ID NO :</b> 1621-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1621 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> THE BOYD PLUMBING CO  2464 S HIGHWAY 29 CANTONMENT,FL 325335808	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1622-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1622 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> THE POOL HOUSE  198 S NOVA RD ORMOND BEACH,FL 321746115	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$426.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$426.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1623-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1623 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> THE UNSTOPPERS INC  18327 DADE LN SPRING HILL,FL 346102207	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,393.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,393.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1624-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1624 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> THERMO AIR INC  2875 N 29TH AVE HOLLYWOOD,FL 330201505	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$60.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$60.00

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1625-1	<b>CLAIM NUMBER :</b> 1625	<b>CLAIMANT :</b> TRANQUILITY POOL SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	19046 BRUCE B DOWNS BLVD # 229	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	TAMPA,FL 336472434		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1626-1	<b>CLAIM NUMBER :</b> 1626	<b>CLAIMANT :</b> TRI CO IRRIGATION INC	<b>AMOUNT RECOMMENDED :</b>	\$500.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	312 E VENICE AVE STE 105	<b>AMOUNT RECMD CLAIMANT :</b>	\$500.00
	<b>DATE PROOF FILED :</b> 02/19/2015	VENICE,FL 342854670		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1627-1	<b>CLAIM NUMBER :</b> 1627	<b>CLAIMANT :</b> TROPICAL APPLIANCE SERVICE	<b>AMOUNT RECOMMENDED :</b>	\$375.72
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	775 PINE MEADOWS RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$375.72
	<b>DATE PROOF FILED :</b> 02/19/2015	ORLANDO,FL 328258075		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1628-1	<b>CLAIM NUMBER :</b> 1628	<b>CLAIMANT :</b> TROPICAL DOORS INC	<b>AMOUNT RECOMMENDED :</b>	\$315.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4909 N US HIGHWAY 1 STE 17	<b>AMOUNT RECMD CLAIMANT :</b>	\$315.00
	<b>DATE PROOF FILED :</b> 02/19/2015	COCOA,FL 329276030		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1629-1	<b>CLAIM NUMBER :</b> 1629	<b>CLAIMANT :</b> TURNER PLUMBING	<b>AMOUNT RECOMMENDED :</b>	\$0.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1903 HENDRICKS AVE	<b>AMOUNT RECMD CLAIMANT :</b>	\$0.00
	<b>DATE PROOF FILED :</b> 02/19/2015	JACKSONVILLE,FL 322073305		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b>	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN	<b>AMOUNT CLAIMED :</b>	\$1.00
<b>ID NO :</b> 1630-1	<b>CLAIM NUMBER :</b> 1630	<b>CLAIMANT :</b> UNITED GARAGE DOOR SERVICES INC	<b>AMOUNT RECOMMENDED :</b>	\$104.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b>		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	8015 34TH AVE E	<b>AMOUNT RECMD CLAIMANT :</b>	\$104.00
	<b>DATE PROOF FILED :</b> 02/19/2015	BRADENTON,FL 342118408		

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1631-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1631 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> UNITED GARAGE DOORS 9118 TUSCAN VALLEY PL ORLANDO,FL 328257581	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1632-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1632 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> UNIVERSAL HEATING AND A/C INC 1022 BUNNELL RD # S-1004 ALTAMONTE SPRINGS,FL 327143814	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1633-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1633 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> US ENVISION LLC DBA A POOL BOY PO BOX 690051 ORLANDO,FL 328690051	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1634-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1634 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> VINCENT ROELL 5825 LEGACY CRESCENT PL UNIT 104 RIVERVIEW,FL 335782823	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1635-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1635 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> VIP EXECUTIVE SERVICES PO BOX 470306 CELEBRATION,FL 347470306	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$1,597.85 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,597.85
<b>COMPANY:</b> 547 <b>ID NO :</b> 1636-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1636 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> VIVIAN QUICHOCHO 1 14846 HERONGLLEN DR LITHIA,FL 335473869	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1637-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1637 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> VOYLES SERVICE  PO BOX 5277 GAINESVILLE,FL 326275277	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1638-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1638 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WATERWAY POOLS INC  2720 SE EAGLE DR PORT ST LUCIE,FL 349848913	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$50.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$50.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1639-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1639 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WATSON ELECTRIC COMPANY  4456 SUNBEAM RD STE 200 JACKSONVILLE,FL 322572428	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1640-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1640 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WATTS MECHANICAL INC  5126 WOODLANE CIRCLE TALLAHASSEE,FL 32303	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$266.43 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$266.43
<b>COMPANY:</b> 547 <b>ID NO :</b> 1641-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1641 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WEIRICH INC  PO BOX 720669 ORLANDO,FL 328720669	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1642-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1642 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WENTZELS HEATING A/C & REFRIGERATION  PO BOX 21893 SARASOTA,FL 342764893	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1643-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1643 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WEST COAST PLUMBING SERVICE INC  113 CRESTVIEW DR BRANDON,FL 335117115	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$521.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$521.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1644-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1644 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WILLARD APPLIANCE  3110 CORRINE DR ORLANDO,FL 328032206	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$403.63 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$403.63
<b>COMPANY:</b> 547 <b>ID NO :</b> 1645-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1645 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WILLINGHAM PLUMBING  439 VALPARAISO PKWY VALPARAISO,FL 325801274	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1646-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1646 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WINFREY PLUMBING  1685 S CLARA AVE DELAND,FL 327207754	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1647-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1647 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WOLF PLUMBING  8371 BOLEYN RD SARASOTA,FL 342409511	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1648-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1648 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> WORKHORSE PLUMBING  PO BOX 773489 OCALA,FL 344773489	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

**EXHIBIT A**



FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1649-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1649 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> YG&B A/C SERVICES INC  3002 SANCHEZ ST TAMPA,FL 336051849	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$234.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$234.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1650-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> <b>CLAIM NUMBER :</b> 1650 <b>INS/CLMT STATE :</b> <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> UDSUNKNOWN UDSUNKNOWN <b>CLAIMANT :</b> YINGYI XU  19006 COUR ESTS LUTZ,FL 335582857	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1651-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW102784 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JIAN ZHONG <b>CLAIMANT :</b> JIAN ZHONG  611 SAMUEL ST DAVENPORT,FL 338976221	<b>AMOUNT CLAIMED :</b> \$241.68 <b>AMOUNT RECOMMENDED :</b> \$241.68 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$241.68
<b>COMPANY:</b> 547 <b>ID NO :</b> 1652-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW103361 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RACHEL SPEAR <b>CLAIMANT :</b> RACHEL SPEAR  4440 NW 49TH ST APT 103 GAINESVILLE,FL 326067659	<b>AMOUNT CLAIMED :</b> \$290.99 <b>AMOUNT RECOMMENDED :</b> \$290.99 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$290.99
<b>COMPANY:</b> 547 <b>ID NO :</b> 1653-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW104298 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MEGHAN LEWIS <b>CLAIMANT :</b> MEGHAN LEWIS  1464 GOODWOOD CT TALLAHASSEE,FL 323084652	<b>AMOUNT CLAIMED :</b> \$53.95 <b>AMOUNT RECOMMENDED :</b> \$53.95 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$53.95
<b>COMPANY:</b> 547 <b>ID NO :</b> 1654-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW104792 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARIE EPSTEIN <b>CLAIMANT :</b> MARIE EPSTEIN  200 LAKE REGION BLVD S WINTER HAVEN,FL 33881	<b>AMOUNT CLAIMED :</b> \$401.26 <b>AMOUNT RECOMMENDED :</b> \$401.26 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$401.26

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1655-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW122166 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHRISTOPHER RICE <b>CLAIMANT :</b> CHRISTOPHER RICE  12385 HAGAN CREEK DR JACKSONVILLE,FL 322188319	<b>AMOUNT CLAIMED :</b> \$30.20 <b>AMOUNT RECOMMENDED :</b> \$30.20 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$30.20
<b>COMPANY:</b> 547 <b>ID NO :</b> 1656-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW122271 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JESSICA RODRIGUEZ <b>CLAIMANT :</b> JESSICA RODRIGUEZ  516 NW 23RD AVE FT LAUDERDALE,FL 333117724	<b>AMOUNT CLAIMED :</b> \$2.75 <b>AMOUNT RECOMMENDED :</b> \$2.75 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$2.75
<b>COMPANY:</b> 547 <b>ID NO :</b> 1657-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW122272 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JO ANN DEMAG <b>CLAIMANT :</b> JO ANN DEMAG  2330 THOREAU DR LAKE WALES,FL 338986681	<b>AMOUNT CLAIMED :</b> \$35.53 <b>AMOUNT RECOMMENDED :</b> \$35.53 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$35.53
<b>COMPANY:</b> 547 <b>ID NO :</b> 1658-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW122812 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SERGEY TONAKANYAN <b>CLAIMANT :</b> SERGEY TONAKANYAN  9918 MOORINGS DR JACKSONVILLE,FL 322577591	<b>AMOUNT CLAIMED :</b> \$649.46 <b>AMOUNT RECOMMENDED :</b> \$46.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$46.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1659-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123261 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JILL FALTZ <b>CLAIMANT :</b> JILL FALTZ  2211 EISENHOWER DR APT 101 DUNEDIN,FL 346985600	<b>AMOUNT CLAIMED :</b> \$38.33 <b>AMOUNT RECOMMENDED :</b> \$38.33 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$38.33
<b>COMPANY:</b> 547 <b>ID NO :</b> 1660-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123301 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> NANCY ARISTIMUNO <b>CLAIMANT :</b> NANCY ARISTIMUNO  1035 ANCHOR RD SAINT JOHNS,FL 322599024	<b>AMOUNT CLAIMED :</b> \$104.96 <b>AMOUNT RECOMMENDED :</b> \$104.96 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$104.96

EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1661-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123335 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHANEL FIELDER <b>CLAIMANT :</b> CHANEL FIELDER  11710 LAKE BUTLER BLVD WINDERMERE,FL 347867817	<b>AMOUNT CLAIMED :</b> \$151.47 <b>AMOUNT RECOMMENDED :</b> \$151.47 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$151.47
<b>COMPANY:</b> 547 <b>ID NO :</b> 1662-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123401 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SUE JIANG <b>CLAIMANT :</b> SUE JIANG  2538 ALBACA DR ORLANDO,FL 328378519	<b>AMOUNT CLAIMED :</b> \$81.87 <b>AMOUNT RECOMMENDED :</b> \$81.87 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$81.87
<b>COMPANY:</b> 547 <b>ID NO :</b> 1663-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123921 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MANUEL LOPEZ TORRES <b>CLAIMANT :</b> MANUEL LOPEZ TORRES  12293 COCONUT GROVE CT JACKSONVILLE,FL 322188669	<b>AMOUNT CLAIMED :</b> \$42.29 <b>AMOUNT RECOMMENDED :</b> \$42.29 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$42.29
<b>COMPANY:</b> 547 <b>ID NO :</b> 1664-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW123997 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RICHARD YDOYAGA <b>CLAIMANT :</b> RICHARD YDOYAGA  14181 NESTING WAY APT D DELRAY BEACH,FL 334842697	<b>AMOUNT CLAIMED :</b> \$67.60 <b>AMOUNT RECOMMENDED :</b> \$67.60 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$67.60
<b>COMPANY:</b> 547 <b>ID NO :</b> 1665-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW124002 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MICHAEL HARTMAN <b>CLAIMANT :</b> MICHAEL HARTMAN  220 DIAMOND CV DESTIN,FL 325413669	<b>AMOUNT CLAIMED :</b> \$79.84 <b>AMOUNT RECOMMENDED :</b> \$79.84 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$79.84
<b>COMPANY:</b> 547 <b>ID NO :</b> 1666-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW124400 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MATTHEW PERRY <b>CLAIMANT :</b> MATTHEW PERRY  2938 CURVING OAKS W ORLANDO,FL 32820	<b>AMOUNT CLAIMED :</b> \$660.00 <b>AMOUNT RECOMMENDED :</b> \$119.31 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$119.31

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1667-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW124432 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MATTHEW PERRY <b>CLAIMANT :</b> MATTHEW PERRY  2938 CURVING OAKS ORLANDO,FL 32821	<b>AMOUNT CLAIMED :</b> \$660.00 <b>AMOUNT RECOMMENDED :</b> \$119.31 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$119.31
<b>COMPANY:</b> 547 <b>ID NO :</b> 1668-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW124433 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MATTHEW PERRY <b>CLAIMANT :</b> MATTHEW PERRY  2938 CURVING OAKS WAY ORLANDO,FL 32820	<b>AMOUNT CLAIMED :</b> \$660.00 <b>AMOUNT RECOMMENDED :</b> \$119.31 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$119.31
<b>COMPANY:</b> 547 <b>ID NO :</b> 1669-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW124629 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> NV <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ADAM BEARDEN <b>CLAIMANT :</b> ADAM BEARDEN  4725 STAFFORD DR LAS VEGAS,NV 891152371	<b>AMOUNT CLAIMED :</b> \$44.10 <b>AMOUNT RECOMMENDED :</b> \$44.10 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$44.10
<b>COMPANY:</b> 547 <b>ID NO :</b> 1670-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW125265 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MATTEW SCOTT <b>CLAIMANT :</b> MATTEW SCOTT  5040 PALMER AVE JACKSONVILLE,FL 322103245	<b>AMOUNT CLAIMED :</b> \$72.22 <b>AMOUNT RECOMMENDED :</b> \$72.22 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$72.22
<b>COMPANY:</b> 547 <b>ID NO :</b> 1671-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW125300 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BRENDA STALLCUP <b>CLAIMANT :</b> BRENDA STALLCUP  1153 BRAFFORTON DR TALLAHASSEE,FL 32301	<b>AMOUNT CLAIMED :</b> \$100.04 <b>AMOUNT RECOMMENDED :</b> \$100.04 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$100.04
<b>COMPANY:</b> 547 <b>ID NO :</b> 1672-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW125523 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LISETTE FERNANDEZ <b>CLAIMANT :</b> LISETTE FERNANDEZ  17744 AYRSHIRE BLVD LAND O LAKES,FL 346387977	<b>AMOUNT CLAIMED :</b> \$80.32 <b>AMOUNT RECOMMENDED :</b> \$80.32 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$80.32

**EXHIBIT A**

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1673-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW125874 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SHENGHONG CHEN <b>CLAIMANT :</b> SHENGHONG CHEN  2517 LACERTA DR ORLANDO,FL 328289330	<b>AMOUNT CLAIMED :</b> \$108.69 <b>AMOUNT RECOMMENDED :</b> \$108.69 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$108.69
<b>COMPANY:</b> 547 <b>ID NO :</b> 1674-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW126051 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> REBECCA SHIFFLET <b>CLAIMANT :</b> REBECCA SHIFFLET  1704 CALVADOS DR COCOA,FL 329265781	<b>AMOUNT CLAIMED :</b> \$162.51 <b>AMOUNT RECOMMENDED :</b> \$162.51 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$162.51
<b>COMPANY:</b> 547 <b>ID NO :</b> 1675-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW126437 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LIRON OFFIR <b>CLAIMANT :</b> LIRON OFFIR  5200 NW 99TH AVE SUNRISE,FL 333514756	<b>AMOUNT CLAIMED :</b> \$68.48 <b>AMOUNT RECOMMENDED :</b> \$68.48 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$68.48
<b>COMPANY:</b> 547 <b>ID NO :</b> 1676-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127508 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOE MASEDA <b>CLAIMANT :</b> JOE MASEDA  5518 LIBERTY PLAIN CIR TAMPA,FL 336115623	<b>AMOUNT CLAIMED :</b> \$144.67 <b>AMOUNT RECOMMENDED :</b> \$144.67 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$144.67
<b>COMPANY:</b> 547 <b>ID NO :</b> 1677-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127555 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JEFFREY ROLLAND <b>CLAIMANT :</b> JEFFREY ROLLAND  1805 TWELVE OAKS LN N NEPTUNE BEACH,FL 322663181	<b>AMOUNT CLAIMED :</b> \$134.89 <b>AMOUNT RECOMMENDED :</b> \$134.89 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$134.89
<b>COMPANY:</b> 547 <b>ID NO :</b> 1678-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127603 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOE MASEDA <b>CLAIMANT :</b> JOE MASEDA  9246 RIVER ROCK LN RIVERVIEW,FL 335785411	<b>AMOUNT CLAIMED :</b> \$144.67 <b>AMOUNT RECOMMENDED :</b> \$144.67 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$144.67

**EXHIBIT A**

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1679-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127604 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOE MASEDA <b>CLAIMANT :</b> JOE MASEDA 536 ROYAL RIDGE ST VALRICO,FL 335944049	<b>AMOUNT CLAIMED :</b> \$144.67 <b>AMOUNT RECOMMENDED :</b> \$144.67 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$144.67
<b>COMPANY:</b> 547 <b>ID NO :</b> 1680-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127649 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MING LEE <b>CLAIMANT :</b> MING LEE 9442 NORTHCLIFFE BLVD SPRING HILL,FL 346061553	<b>AMOUNT CLAIMED :</b> \$122.40 <b>AMOUNT RECOMMENDED :</b> \$122.40 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$122.40
<b>COMPANY:</b> 547 <b>ID NO :</b> 1681-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127720 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TAMMY SPRENKLE <b>CLAIMANT :</b> TAMMY SPRENKLE 5662 OLDE QUEENS CT SAINT CLOUD,FL 347727042	<b>AMOUNT CLAIMED :</b> \$170.07 <b>AMOUNT RECOMMENDED :</b> \$170.07 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$170.07
<b>COMPANY:</b> 547 <b>ID NO :</b> 1682-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127727 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BARBARA TAGERT <b>CLAIMANT :</b> BARBARA TAGERT 4760 NW 80TH AVE OCALA,FL 344822032	<b>AMOUNT CLAIMED :</b> \$178.66 <b>AMOUNT RECOMMENDED :</b> \$178.66 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$178.66
<b>COMPANY:</b> 547 <b>ID NO :</b> 1683-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127765 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> GENE HESS <b>CLAIMANT :</b> GENE HESS 1507 LAKE BALDWIN LN ORLANDO,FL 328146692	<b>AMOUNT CLAIMED :</b> \$235.37 <b>AMOUNT RECOMMENDED :</b> \$235.37 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$235.37
<b>COMPANY:</b> 547 <b>ID NO :</b> 1684-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW127913 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DORIS CAIN <b>CLAIMANT :</b> DORIS CAIN 2521 ONEIDA LOOP KISSIMMEE,FL 347472792	<b>AMOUNT CLAIMED :</b> \$168.07 <b>AMOUNT RECOMMENDED :</b> \$168.07 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$168.07

EXHIBIT A

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 SENSIBLE HOME WARRANTY, LLC  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1685-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW128027 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RICHARD J & LAURA J SZAROWICZ <b>CLAIMANT :</b> RICHARD J & LAURA J SZAROWICZ  2206 COMMON LOON DR LAKELAND,FL 338102386	<b>AMOUNT CLAIMED :</b> \$147.63 <b>AMOUNT RECOMMENDED :</b> \$147.63 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$147.63
<b>COMPANY:</b> 547 <b>ID NO :</b> 1686-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW128473 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BHAGIRATH PATEL <b>CLAIMANT :</b> BHAGIRATH PATEL  11725 CARROLLWOOD COVE DR TAMPA,FL 336244534	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1687-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW128823 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> HAROLD AND CAROL A CARNLEY <b>CLAIMANT :</b> HAROLD AND CAROL A CARNLEY  222 RIVERCHASE BLVD CRESTVIEW,FL 325364229	<b>AMOUNT CLAIMED :</b> \$125.54 <b>AMOUNT RECOMMENDED :</b> \$125.54 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$125.54
<b>COMPANY:</b> 547 <b>ID NO :</b> 1688-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129045 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ROBERT HOGAN <b>CLAIMANT :</b> ROBERT HOGAN  6001 BLAIR CIR GULF BREEZE,FL 325637064	<b>AMOUNT CLAIMED :</b> \$157.22 <b>AMOUNT RECOMMENDED :</b> \$157.22 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$157.22
<b>COMPANY:</b> 547 <b>ID NO :</b> 1689-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129163 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ED PREHER <b>CLAIMANT :</b> ED PREHER  5380 HYLAND HILLS AVE SARASOTA,FL 342417191	<b>AMOUNT CLAIMED :</b> \$159.90 <b>AMOUNT RECOMMENDED :</b> \$159.90 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$159.90
<b>COMPANY:</b> 547 <b>ID NO :</b> 1690-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129269 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> KENNETH RANDALL <b>CLAIMANT :</b> KENNETH RANDALL  29772 SW 164TH CT HOMESTEAD,FL 330333295	<b>AMOUNT CLAIMED :</b> \$524.16 <b>AMOUNT RECOMMENDED :</b> \$524.16 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$524.16

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

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<b>COMPANY:</b> 547 <b>ID NO :</b> 1691-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129284 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RICKY SCHUELLER <b>CLAIMANT :</b> RICKY SCHUELLER  1258 EASTWOOD DR LUTZ,FL 335494189	<b>AMOUNT CLAIMED :</b> \$153.12 <b>AMOUNT RECOMMENDED :</b> \$153.12 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$153.12
<b>COMPANY:</b> 547 <b>ID NO :</b> 1692-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129371 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TAMARA FREEMAN <b>CLAIMANT :</b> TAMARA FREEMAN  668 CORNWALLIS DR DAVENPORT,FL 338978044	<b>AMOUNT CLAIMED :</b> \$161.69 <b>AMOUNT RECOMMENDED :</b> \$161.69 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$161.69
<b>COMPANY:</b> 547 <b>ID NO :</b> 1693-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129372 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TAMARA FREEMAN <b>CLAIMANT :</b> TAMARA FREEMAN  320 ASTER DR DAVENPORT,FL 338973810	<b>AMOUNT CLAIMED :</b> \$161.69 <b>AMOUNT RECOMMENDED :</b> \$161.69 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$161.69
<b>COMPANY:</b> 547 <b>ID NO :</b> 1694-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129500 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DOROTHY JUDSON <b>CLAIMANT :</b> DOROTHY JUDSON  5820 AUDUBON MANOR BLVD LITHIA,FL 335475005	<b>AMOUNT CLAIMED :</b> \$161.04 <b>AMOUNT RECOMMENDED :</b> \$161.04 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$161.04
<b>COMPANY:</b> 547 <b>ID NO :</b> 1695-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129521 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DOROTHY MARSHALL <b>CLAIMANT :</b> DOROTHY MARSHALL  105 OLD PONTE VEDRA DR PONTE VEDRA BEACH,FL 320824416	<b>AMOUNT CLAIMED :</b> \$65.40 <b>AMOUNT RECOMMENDED :</b> \$65.40 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$65.40
<b>COMPANY:</b> 547 <b>ID NO :</b> 1696-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129577 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RONALD SALATEO <b>CLAIMANT :</b> RONALD SALATEO  105 OLD PONTE VEDRA DR PONTE VEDRA BEACH,FL 320824416	<b>AMOUNT CLAIMED :</b> \$157.67 <b>AMOUNT RECOMMENDED :</b> \$157.67 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$157.67

EXHIBIT A



FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1697-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW129652 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JAN ECKERT <b>CLAIMANT :</b> JAN ECKERT  4310 BURLINGTON AVE N ST PETERSBURG,FL 337137326	<b>AMOUNT CLAIMED :</b> \$161.67 <b>AMOUNT RECOMMENDED :</b> \$161.67 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$161.67
<b>COMPANY:</b> 547 <b>ID NO :</b> 1698-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW130254 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TOMMY ALFORD <b>CLAIMANT :</b> TOMMY ALFORD  3237 WOODGLEN DR ORANGE PARK,FL 320656683	<b>AMOUNT CLAIMED :</b> \$164.53 <b>AMOUNT RECOMMENDED :</b> \$164.53 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$164.53
<b>COMPANY:</b> 547 <b>ID NO :</b> 1699-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW130357 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHARLES SCOTT <b>CLAIMANT :</b> CHARLES SCOTT  1415 SUN MARSH DR JACKSONVILLE,FL 322255833	<b>AMOUNT CLAIMED :</b> \$198.26 <b>AMOUNT RECOMMENDED :</b> \$198.26 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$198.26
<b>COMPANY:</b> 547 <b>ID NO :</b> 1700-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW130372 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BEN TISSER <b>CLAIMANT :</b> BEN TISSER  6530 VIA ROSA BOCA RATON,FL 334336465	<b>AMOUNT CLAIMED :</b> \$208.37 <b>AMOUNT RECOMMENDED :</b> \$208.37 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$208.37
<b>COMPANY:</b> 547 <b>ID NO :</b> 1701-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW130465 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DANIEL JACOBS <b>CLAIMANT :</b> DANIEL JACOBS  20940 CALLE CRISTAL LN UNIT 1 NORTH FORT MYERS,FL 339178105	<b>AMOUNT CLAIMED :</b> \$184.17 <b>AMOUNT RECOMMENDED :</b> \$184.17 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$184.17
<b>COMPANY:</b> 547 <b>ID NO :</b> 1702-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW130995 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JAMES TAYLOR <b>CLAIMANT :</b> JAMES TAYLOR  13601 PINE MEADOW CT DAVIE,FL 333255101	<b>AMOUNT CLAIMED :</b> \$291.95 <b>AMOUNT RECOMMENDED :</b> \$291.95 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$291.95

**EXHIBIT A**

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1703-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW131154 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DWAYNE CLUTTER <b>CLAIMANT :</b> DWAYNE CLUTTER  123 BRIARGATE LOOK ORMOND BEACH,FL 321740728	<b>AMOUNT CLAIMED :</b> \$171.26 <b>AMOUNT RECOMMENDED :</b> \$171.26 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$171.26
<b>COMPANY:</b> 547 <b>ID NO :</b> 1704-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW131514 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ERIKA PICARD <b>CLAIMANT :</b> ERIKA PICARD  851 VILLAGE WAY PALM HARBOR,FL 346832940	<b>AMOUNT CLAIMED :</b> \$238.24 <b>AMOUNT RECOMMENDED :</b> \$238.24 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$238.24
<b>COMPANY:</b> 547 <b>ID NO :</b> 1705-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW131974 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MATTHEW HOLSOPPLE <b>CLAIMANT :</b> MATTHEW HOLSOPPLE  25812 HARTACK DR WESLEY CHAPEL,FL 335445547	<b>AMOUNT CLAIMED :</b> \$157.59 <b>AMOUNT RECOMMENDED :</b> \$157.59 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$157.59
<b>COMPANY:</b> 547 <b>ID NO :</b> 1706-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW131984 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DEVIN WALKER <b>CLAIMANT :</b> DEVIN WALKER  2617 NEUCHATEL DR TALLAHASSEE,FL 323032249	<b>AMOUNT CLAIMED :</b> \$251.59 <b>AMOUNT RECOMMENDED :</b> \$251.59 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$251.59
<b>COMPANY:</b> 547 <b>ID NO :</b> 1707-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132017 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ALEXANDRE GRASAS <b>CLAIMANT :</b> ALEXANDRE GRASAS  2735 SW 35TH PL GAINESVILLE,FL 326083293	<b>AMOUNT CLAIMED :</b> \$169.87 <b>AMOUNT RECOMMENDED :</b> \$169.87 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$169.87
<b>COMPANY:</b> 547 <b>ID NO :</b> 1708-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132231 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> KULSUM BHIMANI <b>CLAIMANT :</b> KULSUM BHIMANI  1155 KERSFIELD CIR LAKE MARY,FL 327461933	<b>AMOUNT CLAIMED :</b> \$196.42 <b>AMOUNT RECOMMENDED :</b> \$196.42 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$196.42

## EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1709-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132237 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DAWN FACKLER <b>CLAIMANT :</b> DAWN FACKLER  10800 SW 67TH TER OCALA,FL 344764763	<b>AMOUNT CLAIMED :</b> \$200.99 <b>AMOUNT RECOMMENDED :</b> \$200.99 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$200.99
<b>COMPANY:</b> 547 <b>ID NO :</b> 1710-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132417 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOSE ESTRADA <b>CLAIMANT :</b> JOSE ESTRADA  11475 CARDINAL WAY LARGO,FL 337743915	<b>AMOUNT CLAIMED :</b> \$234.59 <b>AMOUNT RECOMMENDED :</b> \$234.59 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$234.59
<b>COMPANY:</b> 547 <b>ID NO :</b> 1711-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132573 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> FRANCIS KELLY <b>CLAIMANT :</b> FRANCIS KELLY  3676 LETITIA LN TALLAHASSEE,FL 323121031	<b>AMOUNT CLAIMED :</b> \$182.36 <b>AMOUNT RECOMMENDED :</b> \$182.36 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$182.36
<b>COMPANY:</b> 547 <b>ID NO :</b> 1712-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132574 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> FRANCIS KELLY <b>CLAIMANT :</b> FRANCIS KELLY  813 JAMESTOWN CT TALLAHASSEE,FL 323035742	<b>AMOUNT CLAIMED :</b> \$182.36 <b>AMOUNT RECOMMENDED :</b> \$182.36 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$182.36
<b>COMPANY:</b> 547 <b>ID NO :</b> 1713-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132644 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> YANIV OFFIR <b>CLAIMANT :</b> YANIV OFFIR  3601 N 33RD TER HOLLYWOOD,FL 330212503	<b>AMOUNT CLAIMED :</b> \$225.04 <b>AMOUNT RECOMMENDED :</b> \$225.04 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$225.04
<b>COMPANY:</b> 547 <b>ID NO :</b> 1714-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132718 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOHN TINGLE <b>CLAIMANT :</b> JOHN TINGLE  12630 175TH RD N JUPITER,FL 334784620	<b>AMOUNT CLAIMED :</b> \$386.91 <b>AMOUNT RECOMMENDED :</b> \$386.91 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$386.91

## EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1715-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132758 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> GARY JOURA <b>CLAIMANT :</b> GARY JOURA  320 SEA ISLAND WAY TAMPA,FL 336025960	<b>AMOUNT CLAIMED :</b> \$238.02 <b>AMOUNT RECOMMENDED :</b> \$238.02 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$238.02
<b>COMPANY:</b> 547 <b>ID NO :</b> 1716-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132783 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JENNY WILSON <b>CLAIMANT :</b> JENNY WILSON  11423 BELLE HAVEN DR NEW PORT RICHEY,FL 346544435	<b>AMOUNT CLAIMED :</b> \$204.13 <b>AMOUNT RECOMMENDED :</b> \$204.13 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$204.13
<b>COMPANY:</b> 547 <b>ID NO :</b> 1717-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133005 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> HAI KIEU <b>CLAIMANT :</b> HAI KIEU  1108 DARNABY WAY ORLANDO,FL 328245074	<b>AMOUNT CLAIMED :</b> \$343.13 <b>AMOUNT RECOMMENDED :</b> \$343.13 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$343.13
<b>COMPANY:</b> 547 <b>ID NO :</b> 1718-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133073 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ROD LUBASKI <b>CLAIMANT :</b> ROD LUBASKI  3715 SAN SIMEON CIR WESTON,FL 333315048	<b>AMOUNT CLAIMED :</b> \$205.42 <b>AMOUNT RECOMMENDED :</b> \$205.42 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$205.42
<b>COMPANY:</b> 547 <b>ID NO :</b> 1719-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133074 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ROD LUBASKI <b>CLAIMANT :</b> ROD LUBASKI  177 E BAYRIDGE DR WESTON,FL 333263530	<b>AMOUNT CLAIMED :</b> \$205.42 <b>AMOUNT RECOMMENDED :</b> \$205.42 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$205.42
<b>COMPANY:</b> 547 <b>ID NO :</b> 1720-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133167 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ADAM BADT <b>CLAIMANT :</b> ADAM BADT  5557 BRISTOL BAY LN N JACKSONVILLE,FL 322446928	<b>AMOUNT CLAIMED :</b> \$226.94 <b>AMOUNT RECOMMENDED :</b> \$226.94 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$226.94

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1721-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133415 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DAVID BORDEN <b>CLAIMANT :</b> DAVID BORDEN  1730 SAGECREST CT THE VILLAGES,FL 321623225	<b>AMOUNT CLAIMED :</b> \$224.11 <b>AMOUNT RECOMMENDED :</b> \$224.11 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$224.11
<b>COMPANY:</b> 547 <b>ID NO :</b> 1722-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133622 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ELIZABETH JONES <b>CLAIMANT :</b> ELIZABETH JONES  112 SIMPSON DR INTERLACHEN,FL 321484222	<b>AMOUNT CLAIMED :</b> \$252.23 <b>AMOUNT RECOMMENDED :</b> \$252.23 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$252.23
<b>COMPANY:</b> 547 <b>ID NO :</b> 1723-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133694 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> HOWARD LEIBOWITZ <b>CLAIMANT :</b> HOWARD LEIBOWITZ  2528 HUNTERS RUN WAY WESTON,FL 333271437	<b>AMOUNT CLAIMED :</b> \$252.85 <b>AMOUNT RECOMMENDED :</b> \$252.85 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$252.85
<b>COMPANY:</b> 547 <b>ID NO :</b> 1724-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133802 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CEDRIC DAWKINS <b>CLAIMANT :</b> CEDRIC DAWKINS  10025 DORIATH CIR ORLANDO,FL 328259101	<b>AMOUNT CLAIMED :</b> \$571.13 <b>AMOUNT RECOMMENDED :</b> \$571.13 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$571.13
<b>COMPANY:</b> 547 <b>ID NO :</b> 1725-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133844 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DAVID BARRY <b>CLAIMANT :</b> DAVID BARRY  913 S BRUCE ST TAMPA,FL 336062813	<b>AMOUNT CLAIMED :</b> \$254.77 <b>AMOUNT RECOMMENDED :</b> \$254.77 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$254.77
<b>COMPANY:</b> 547 <b>ID NO :</b> 1726-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133851 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARY ORR <b>CLAIMANT :</b> MARY ORR  3773 WINDING LAKE CIR ORLANDO,FL 328352667	<b>AMOUNT CLAIMED :</b> \$236.40 <b>AMOUNT RECOMMENDED :</b> \$236.40 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$236.40

**EXHIBIT A**

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1727-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133852 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARY ORR <b>CLAIMANT :</b> MARY ORR  504 SYCAMORE ST KISSIMMEE,FL 347474671	<b>AMOUNT CLAIMED :</b> \$420.57 <b>AMOUNT RECOMMENDED :</b> \$420.57 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$420.57
<b>COMPANY:</b> 547 <b>ID NO :</b> 1728-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133853 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARY ORR <b>CLAIMANT :</b> MARY ORR  4631 S ATLANTIC AVE PORT ORANGE,FL 321278050	<b>AMOUNT CLAIMED :</b> \$452.64 <b>AMOUNT RECOMMENDED :</b> \$452.64 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$452.64
<b>COMPANY:</b> 547 <b>ID NO :</b> 1729-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133862 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> VILMA WALKER <b>CLAIMANT :</b> VILMA WALKER  13321 FOX GLOVE ST WINTER GARDEN,FL 347874714	<b>AMOUNT CLAIMED :</b> \$325.17 <b>AMOUNT RECOMMENDED :</b> \$325.17 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$325.17
<b>COMPANY:</b> 547 <b>ID NO :</b> 1730-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133867 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> VILMA WALKER <b>CLAIMANT :</b> VILMA WALKER  1168 HAWKSLADE CT WINTER GARDEN,FL 347874731	<b>AMOUNT CLAIMED :</b> \$253.88 <b>AMOUNT RECOMMENDED :</b> \$253.88 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$253.88
<b>COMPANY:</b> 547 <b>ID NO :</b> 1731-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW133873 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SOURAYA SARRIEDINE <b>CLAIMANT :</b> SOURAYA SARRIEDINE  1570 CHESTNUT AVE WINTER PARK,FL 327891606	<b>AMOUNT CLAIMED :</b> \$226.16 <b>AMOUNT RECOMMENDED :</b> \$226.16 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$226.16
<b>COMPANY:</b> 547 <b>ID NO :</b> 1732-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW134412 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BILL LIMATO <b>CLAIMANT :</b> BILL LIMATO  225 RANIER CV APT 101 CASSELBERRY,FL 327076839	<b>AMOUNT CLAIMED :</b> \$242.92 <b>AMOUNT RECOMMENDED :</b> \$242.92 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$242.92

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1733-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW134598 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JERRY ROCCO <b>CLAIMANT :</b> JERRY ROCCO  65 HERON DR PALM COAST,FL 321371313	<b>AMOUNT CLAIMED :</b> \$562.61 <b>AMOUNT RECOMMENDED :</b> \$562.61 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$562.61
<b>COMPANY:</b> 547 <b>ID NO :</b> 1734-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW134688 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHANEL FIELDER <b>CLAIMANT :</b> CHANEL FIELDER  14118 MAGNOLIA GLEN CIR ORLANDO,FL 328288379	<b>AMOUNT CLAIMED :</b> \$246.79 <b>AMOUNT RECOMMENDED :</b> \$246.79 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$246.79
<b>COMPANY:</b> 547 <b>ID NO :</b> 1735-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135042 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOHN LATIOLAIS <b>CLAIMANT :</b> JOHN LATIOLAIS  11620 E BAY RD GIBSONTON,FL 335345620	<b>AMOUNT CLAIMED :</b> \$270.75 <b>AMOUNT RECOMMENDED :</b> \$270.75 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$270.75
<b>COMPANY:</b> 547 <b>ID NO :</b> 1736-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135140 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RENARD LARUSSI <b>CLAIMANT :</b> RENARD LARUSSI  5200 N FLAGLER DR WEST PALM BEACH,FL 334072755	<b>AMOUNT CLAIMED :</b> \$223.41 <b>AMOUNT RECOMMENDED :</b> \$223.41 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$223.41
<b>COMPANY:</b> 547 <b>ID NO :</b> 1737-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135141 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RENARD LARUSSI <b>CLAIMANT :</b> RENARD LARUSSI  1850 S OCEAN DR HALLANDALE BEACH,FL 330097675	<b>AMOUNT CLAIMED :</b> \$223.41 <b>AMOUNT RECOMMENDED :</b> \$223.41 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$223.41
<b>COMPANY:</b> 547 <b>ID NO :</b> 1738-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135146 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LAURIE TEGREENE <b>CLAIMANT :</b> LAURIE TEGREENE  466 W SHORE DR SUMMERLAND KEY,FL 330424429	<b>AMOUNT CLAIMED :</b> \$172.25 <b>AMOUNT RECOMMENDED :</b> \$172.25 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$172.25

**EXHIBIT A**

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1739-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135184 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHIN HSUN HSIEH <b>CLAIMANT :</b> CHIN HSUN HSIEH 838 CRYSTAL WAY ORANGE PARK,FL 320655554	<b>AMOUNT CLAIMED :</b> \$1,264.17 <b>AMOUNT RECOMMENDED :</b> \$1,264.17 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,264.17
<b>COMPANY:</b> 547 <b>ID NO :</b> 1740-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135249 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CASSIO CAPPELOSSA <b>CLAIMANT :</b> CASSIO CAPPELOSSA 302 SE 3RD PL DANIA,FL 330044702	<b>AMOUNT CLAIMED :</b> \$220.82 <b>AMOUNT RECOMMENDED :</b> \$220.82 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$220.82
<b>COMPANY:</b> 547 <b>ID NO :</b> 1741-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135257 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JENNIFER GALLAGHER <b>CLAIMANT :</b> JENNIFER GALLAGHER 632 ADRIANE PARK CIR KISSIMMEE,FL 347444900	<b>AMOUNT CLAIMED :</b> \$232.47 <b>AMOUNT RECOMMENDED :</b> \$232.47 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$232.47
<b>COMPANY:</b> 547 <b>ID NO :</b> 1742-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135296 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> U K CUSTRED <b>CLAIMANT :</b> U K CUSTRED 5981 LAKE VICTORIA DR LAKELAND,FL 338134720	<b>AMOUNT CLAIMED :</b> \$300.86 <b>AMOUNT RECOMMENDED :</b> \$300.86 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$300.86
<b>COMPANY:</b> 547 <b>ID NO :</b> 1743-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135353 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> GAIL ZALEV <b>CLAIMANT :</b> GAIL ZALEV 7146 VIA GENOVA DELRAY BEACH,FL 334463753	<b>AMOUNT CLAIMED :</b> \$300.17 <b>AMOUNT RECOMMENDED :</b> \$300.17 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$300.17
<b>COMPANY:</b> 547 <b>ID NO :</b> 1744-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135376 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JAYANT RAJAGOPAL <b>CLAIMANT :</b> JAYANT RAJAGOPAL 242 CADIZ LOOP DAVENPORT,FL 338371402	<b>AMOUNT CLAIMED :</b> \$315.03 <b>AMOUNT RECOMMENDED :</b> \$315.03 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$315.03

## EXHIBIT A



## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1745-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135377 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JAYANT RAJAGOPAL <b>CLAIMANT :</b> JAYANT RAJAGOPAL  131 CADIZ LOOP DAVENPORT,FL 338371450	<b>AMOUNT CLAIMED :</b> \$315.00 <b>AMOUNT RECOMMENDED :</b> \$315.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$315.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1746-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135380 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHRISTIAN SALNARS <b>CLAIMANT :</b> CHRISTIAN SALNARS  5880 COLLINS AVE MIAMI BEACH,FL 331402201	<b>AMOUNT CLAIMED :</b> \$246.96 <b>AMOUNT RECOMMENDED :</b> \$246.96 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$246.96
<b>COMPANY:</b> 547 <b>ID NO :</b> 1747-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135432 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ROBERT WOODARDS <b>CLAIMANT :</b> ROBERT WOODARDS  9355 HAWKS POINT DR JACKSONVILLE,FL 322222819	<b>AMOUNT CLAIMED :</b> \$241.27 <b>AMOUNT RECOMMENDED :</b> \$241.27 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$241.27
<b>COMPANY:</b> 547 <b>ID NO :</b> 1748-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135444 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOSEPH PELLETTIERE <b>CLAIMANT :</b> JOSEPH PELLETTIERE  7801 MAPLEWOOD DR APT 905 WEST MELBOURNE,FL 329041663	<b>AMOUNT CLAIMED :</b> \$551.05 <b>AMOUNT RECOMMENDED :</b> \$551.05 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$551.05
<b>COMPANY:</b> 547 <b>ID NO :</b> 1749-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135498 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHERYL KOEGEL <b>CLAIMANT :</b> CHERYL KOEGEL  3302 TALA LOOP LONGWOOD,FL 327793128	<b>AMOUNT CLAIMED :</b> \$285.98 <b>AMOUNT RECOMMENDED :</b> \$285.98 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$285.98
<b>COMPANY:</b> 547 <b>ID NO :</b> 1750-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW135519 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LENNIE KRUK <b>CLAIMANT :</b> LENNIE KRUK  3757 EAGLE HAMMOCK DR SARASOTA,FL 342408239	<b>AMOUNT CLAIMED :</b> \$1,238.56 <b>AMOUNT RECOMMENDED :</b> \$492.12 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$492.12

## EXHIBIT A

## SENSIBLE HOME WARRANTY, LLC

## FINAL CLAIMS REPORT

## PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135889	<b>INSURED :</b> JAMES BAMFORD	<b>AMOUNT CLAIMED :</b>	\$288.18
<b>ID NO :</b> 1751-1	<b>CLAIM NUMBER :</b>	<b>CLAIMANT :</b> JAMES BAMFORD	<b>AMOUNT RECOMMENDED :</b>	\$288.18
<b>PRIORITY :</b> CLASS 3	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	4830 ANDRADE	<b>AMOUNT RECMD CLAIMANT :</b>	\$288.18
	<b>DATE PROOF FILED :</b> 02/19/2015	PENSACOLA,FL 325049020		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135927	<b>INSURED :</b> PAUL CHIN FONG	<b>AMOUNT CLAIMED :</b>	\$341.58
<b>ID NO :</b> 1752-1	<b>CLAIM NUMBER :</b>	<b>CLAIMANT :</b> PAUL CHIN FONG	<b>AMOUNT RECOMMENDED :</b>	\$341.58
<b>PRIORITY :</b> CLASS 3	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	17455 HUGH LN	<b>AMOUNT RECMD CLAIMANT :</b>	\$341.58
	<b>DATE PROOF FILED :</b> 02/19/2015	LAND O LAKES,FL 346387870		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135942	<b>INSURED :</b> LENWORTH MATTHEWS	<b>AMOUNT CLAIMED :</b>	\$268.67
<b>ID NO :</b> 1753-1	<b>CLAIM NUMBER :</b>	<b>CLAIMANT :</b> LENWORTH MATTHEWS	<b>AMOUNT RECOMMENDED :</b>	\$268.67
<b>PRIORITY :</b> CLASS 3	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	3857 ISLAND WAY	<b>AMOUNT RECMD CLAIMANT :</b>	\$268.67
	<b>DATE PROOF FILED :</b> 02/19/2015	ST PETERSBURG,FL 337056450		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW135943	<b>INSURED :</b> LENWORTH MATTHEWS	<b>AMOUNT CLAIMED :</b>	\$268.67
<b>ID NO :</b> 1754-1	<b>CLAIM NUMBER :</b>	<b>CLAIMANT :</b> LENWORTH MATTHEWS	<b>AMOUNT RECOMMENDED :</b>	\$268.67
<b>PRIORITY :</b> CLASS 3	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2425 MIDDLETON GROVE DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$268.67
	<b>DATE PROOF FILED :</b> 02/19/2015	BRANDON,FL 335114777		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW136113	<b>INSURED :</b> CAHRLINE TAYLOR	<b>AMOUNT CLAIMED :</b>	\$299.02
<b>ID NO :</b> 1755-1	<b>CLAIM NUMBER :</b>	<b>CLAIMANT :</b> CAHRLINE TAYLOR	<b>AMOUNT RECOMMENDED :</b>	\$299.02
<b>PRIORITY :</b> CLASS 3	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	2426 BURNS DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$299.02
	<b>DATE PROOF FILED :</b> 02/19/2015	MIDDLEBURG,FL 320686909		

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW136230	<b>INSURED :</b> EDUARDO JAIMES	<b>AMOUNT CLAIMED :</b>	\$669.00
<b>ID NO :</b> 1756-1	<b>CLAIM NUMBER :</b>	<b>CLAIMANT :</b> EDUARDO JAIMES	<b>AMOUNT RECOMMENDED :</b>	\$262.95
<b>PRIORITY :</b> CLASS 3	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	1590 DRUID RD	<b>AMOUNT RECMD CLAIMANT :</b>	\$262.95
	<b>DATE PROOF FILED :</b> 02/19/2015	MAITLAND,FL 327514208		

## EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1757-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136261 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHRIS WUESTENHOEFER <b>CLAIMANT :</b> CHRIS WUESTENHOEFER  655 ROCHESTER LOOP DAVENPORT,FL 338978569	<b>AMOUNT CLAIMED :</b> \$358.13 <b>AMOUNT RECOMMENDED :</b> \$358.13 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$358.13
<b>COMPANY:</b> 547 <b>ID NO :</b> 1758-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136458 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> NEAL CAPLE <b>CLAIMANT :</b> NEAL CAPLE  209 VISTORIA DR NORTH PORT,FL 342872593	<b>AMOUNT CLAIMED :</b> \$301.05 <b>AMOUNT RECOMMENDED :</b> \$301.05 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$301.05
<b>COMPANY:</b> 547 <b>ID NO :</b> 1759-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136575 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> GREGORY VIDGOP <b>CLAIMANT :</b> GREGORY VIDGOP  1260 LAUREL CT WESTON,FL 333262838	<b>AMOUNT CLAIMED :</b> \$767.41 <b>AMOUNT RECOMMENDED :</b> \$767.41 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$767.41
<b>COMPANY:</b> 547 <b>ID NO :</b> 1760-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136577 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ELIZABETH DIGIOVANNA <b>CLAIMANT :</b> ELIZABETH DIGIOVANNA  2287 SABASTIAN ST MOUNT DORA,FL 327578711	<b>AMOUNT CLAIMED :</b> \$303.62 <b>AMOUNT RECOMMENDED :</b> \$303.62 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$303.62
<b>COMPANY:</b> 547 <b>ID NO :</b> 1761-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136623 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> HERMAN BROWN <b>CLAIMANT :</b> HERMAN BROWN  10862 SW 71ST CIR OCALA,FL 344765702	<b>AMOUNT CLAIMED :</b> \$291.22 <b>AMOUNT RECOMMENDED :</b> \$291.22 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$291.22
<b>COMPANY:</b> 547 <b>ID NO :</b> 1762-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136838 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> PATRICIA CUNHA <b>CLAIMANT :</b> PATRICIA CUNHA  225 SE 3RD AVE MELROSE,FL 326665469	<b>AMOUNT CLAIMED :</b> \$390.52 <b>AMOUNT RECOMMENDED :</b> \$390.52 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$390.52

**EXHIBIT A**

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1763-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW136918 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> FREDRICKA WAYMON <b>CLAIMANT :</b> FREDRICKA WAYMON  8016 RENAULT DR JACKSONVILLE,FL 322441326	<b>AMOUNT CLAIMED :</b> \$374.52 <b>AMOUNT RECOMMENDED :</b> \$374.52 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$374.52
<b>COMPANY:</b> 547 <b>ID NO :</b> 1764-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137042 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RYAN RYEN <b>CLAIMANT :</b> RYAN RYEN  11540 TRUXTON CT JACKSONVILLE,FL 322231363	<b>AMOUNT CLAIMED :</b> \$575.85 <b>AMOUNT RECOMMENDED :</b> \$575.85 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$575.85
<b>COMPANY:</b> 547 <b>ID NO :</b> 1765-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137120 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ANDREW SCHULTZ <b>CLAIMANT :</b> ANDREW SCHULTZ  12706 CASEY RD TAMPA,FL 336188502	<b>AMOUNT CLAIMED :</b> \$416.91 <b>AMOUNT RECOMMENDED :</b> \$416.91 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$416.91
<b>COMPANY:</b> 547 <b>ID NO :</b> 1766-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137358 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHARLES MCDONALD <b>CLAIMANT :</b> CHARLES MCDONALD  57 PLEASANT HILL DR DEBARY,FL 327133292	<b>AMOUNT CLAIMED :</b> \$355.42 <b>AMOUNT RECOMMENDED :</b> \$355.42 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$355.42
<b>COMPANY:</b> 547 <b>ID NO :</b> 1767-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137359 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHARLES MCDONALD <b>CLAIMANT :</b> CHARLES MCDONALD  2748 DELCREST DR ORLANDO,FL 328172668	<b>AMOUNT CLAIMED :</b> \$381.01 <b>AMOUNT RECOMMENDED :</b> \$381.01 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$381.01
<b>COMPANY:</b> 547 <b>ID NO :</b> 1768-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137360 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHARLES MCDONALD <b>CLAIMANT :</b> CHARLES MCDONALD  7456 WOODBURN CT WINTER PARK,FL 327926571	<b>AMOUNT CLAIMED :</b> \$381.01 <b>AMOUNT RECOMMENDED :</b> \$381.01 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$381.01

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1769-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137530 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BETTY GISSENDANNER <b>CLAIMANT :</b> BETTY GISSENDANNER  23259 PAINTER AVE PORT CHARLOTTE,FL 339543645	<b>AMOUNT CLAIMED :</b> \$320.40 <b>AMOUNT RECOMMENDED :</b> \$320.40 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$320.40
<b>COMPANY:</b> 547 <b>ID NO :</b> 1770-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137731 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TONI BROWN <b>CLAIMANT :</b> TONI BROWN  15732 SW 41ST ST MIRAMAR,FL 330274812	<b>AMOUNT CLAIMED :</b> \$315.91 <b>AMOUNT RECOMMENDED :</b> \$315.91 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$315.91
<b>COMPANY:</b> 547 <b>ID NO :</b> 1771-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137732 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TONI BROWN <b>CLAIMANT :</b> TONI BROWN  318 NE 7TH AVE FORT LAUDERDALE,FL 333011600	<b>AMOUNT CLAIMED :</b> \$388.07 <b>AMOUNT RECOMMENDED :</b> \$388.07 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$388.07
<b>COMPANY:</b> 547 <b>ID NO :</b> 1772-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137752 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JENNIFER YOUNG <b>CLAIMANT :</b> JENNIFER YOUNG  2010 E PALM AVE TAMPA,FL 336053932	<b>AMOUNT CLAIMED :</b> \$328.83 <b>AMOUNT RECOMMENDED :</b> \$328.83 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$328.83
<b>COMPANY:</b> 547 <b>ID NO :</b> 1773-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137816 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DAN FRYER <b>CLAIMANT :</b> DAN FRYER  4611 CARDINAL BLVD JACKSONVILLE,FL 322101905	<b>AMOUNT CLAIMED :</b> \$6.79 <b>AMOUNT RECOMMENDED :</b> \$6.79 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$6.79
<b>COMPANY:</b> 547 <b>ID NO :</b> 1774-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW137924 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TAMARA CARUS <b>CLAIMANT :</b> TAMARA CARUS  24521 SW 217TH AVE HOMESTEAD,FL 330313669	<b>AMOUNT CLAIMED :</b> \$454.08 <b>AMOUNT RECOMMENDED :</b> \$454.08 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$454.08

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1775-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138218 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHARLES WILKINSON <b>CLAIMANT :</b> CHARLES WILKINSON 5617 SKIMMER DR APOLLO BEACH,FL 335723353	<b>AMOUNT CLAIMED :</b> \$12.48 <b>AMOUNT RECOMMENDED :</b> \$12.48 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$12.48
<b>COMPANY:</b> 547 <b>ID NO :</b> 1776-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138223 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DANIEL MELUCCI <b>CLAIMANT :</b> DANIEL MELUCCI 4080 IRONWOOD CIR 303-C BRADENTON,FL 34209	<b>AMOUNT CLAIMED :</b> \$322.46 <b>AMOUNT RECOMMENDED :</b> \$322.46 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$322.46
<b>COMPANY:</b> 547 <b>ID NO :</b> 1777-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138259 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOE KELLER <b>CLAIMANT :</b> JOE KELLER 243 SCENIC DR COCOA,FL 329262577	<b>AMOUNT CLAIMED :</b> \$738.67 <b>AMOUNT RECOMMENDED :</b> \$738.67 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$738.67
<b>COMPANY:</b> 547 <b>ID NO :</b> 1778-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138357 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOSEPH KOHL <b>CLAIMANT :</b> JOSEPH KOHL 3537 GORMAN DR NEW PORT RICHEY,FL 346552605	<b>AMOUNT CLAIMED :</b> \$8.93 <b>AMOUNT RECOMMENDED :</b> \$8.93 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$8.93
<b>COMPANY:</b> 547 <b>ID NO :</b> 1779-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138359 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> KEVIN NEPAUL <b>CLAIMANT :</b> KEVIN NEPAUL 2629 VINEYARD CIR SANFORD,FL 327716847	<b>AMOUNT CLAIMED :</b> \$5.00 <b>AMOUNT RECOMMENDED :</b> \$5.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$5.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1780-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138366 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHUANGMING CHEN <b>CLAIMANT :</b> CHUANGMING CHEN 13316 LOW TIDE WAY JACKSONVILLE,FL 322585206	<b>AMOUNT CLAIMED :</b> \$333.94 <b>AMOUNT RECOMMENDED :</b> \$333.94 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$333.94

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1781-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138388 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> AMIT PANDEY <b>CLAIMANT :</b> AMIT PANDEY  8824 ELLIOTTS CT ORLANDO,FL 328365027	<b>AMOUNT CLAIMED :</b> \$456.21 <b>AMOUNT RECOMMENDED :</b> \$456.21 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$456.21
<b>COMPANY:</b> 547 <b>ID NO :</b> 1782-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138543 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SRINIVAS YARRAGUNTA <b>CLAIMANT :</b> SRINIVAS YARRAGUNTA  3821 HARTWOOD CT JACKSONVILLE,FL 322161488	<b>AMOUNT CLAIMED :</b> \$366.80 <b>AMOUNT RECOMMENDED :</b> \$366.80 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$366.80
<b>COMPANY:</b> 547 <b>ID NO :</b> 1783-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138571 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> AMIT SINHA <b>CLAIMANT :</b> AMIT SINHA  1250 STANDRIDGE DR WESLEY CHAPEL,FL 335437658	<b>AMOUNT CLAIMED :</b> \$344.99 <b>AMOUNT RECOMMENDED :</b> \$344.99 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$344.99
<b>COMPANY:</b> 547 <b>ID NO :</b> 1784-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138629 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DEBRA RUBINS <b>CLAIMANT :</b> DEBRA RUBINS  12903 NW 151ST RD ALACHUA,FL 326155741	<b>AMOUNT CLAIMED :</b> \$273.26 <b>AMOUNT RECOMMENDED :</b> \$273.26 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$273.26
<b>COMPANY:</b> 547 <b>ID NO :</b> 1785-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138678 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MANHUA SUN <b>CLAIMANT :</b> MANHUA SUN  4045 PALMA CEIA CIR WINTER HAVEN,FL 338841292	<b>AMOUNT CLAIMED :</b> \$441.05 <b>AMOUNT RECOMMENDED :</b> \$441.05 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$441.05
<b>COMPANY:</b> 547 <b>ID NO :</b> 1786-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138768 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JOHN TANGRI <b>CLAIMANT :</b> JOHN TANGRI  7201 BLACK BULL LN ORLANDO,FL 328355168	<b>AMOUNT CLAIMED :</b> \$11.99 <b>AMOUNT RECOMMENDED :</b> \$11.99 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$11.99

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1787-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138770 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SUREKHA PATEL <b>CLAIMANT :</b> SUREKHA PATEL  10722 CORY LAKE DR TAMPA,FL 336472724	<b>AMOUNT CLAIMED :</b> \$452.95 <b>AMOUNT RECOMMENDED :</b> \$452.95 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$452.95
<b>COMPANY:</b> 547 <b>ID NO :</b> 1788-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW138825 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> KRISHNA AJVALIA <b>CLAIMANT :</b> KRISHNA AJVALIA  9710 ASBEL ESTATES ST LAND O LAKES,FL 346386144	<b>AMOUNT CLAIMED :</b> \$13.60 <b>AMOUNT RECOMMENDED :</b> \$13.60 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$13.60
<b>COMPANY:</b> 547 <b>ID NO :</b> 1789-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139103 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ROBERT PADGHAM <b>CLAIMANT :</b> ROBERT PADGHAM  6005 BRIARFOREST RD N JACKSONVILLE,FL 322771401	<b>AMOUNT CLAIMED :</b> \$491.25 <b>AMOUNT RECOMMENDED :</b> \$491.25 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$491.25
<b>COMPANY:</b> 547 <b>ID NO :</b> 1790-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139180 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RACHID MEHDAOVA <b>CLAIMANT :</b> RACHID MEHDAOVA  20151 OAKFLOWER AVE TAMPA,FL 336473649	<b>AMOUNT CLAIMED :</b> \$369.47 <b>AMOUNT RECOMMENDED :</b> \$369.47 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$369.47
<b>COMPANY:</b> 547 <b>ID NO :</b> 1791-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139296 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> PAULETTE PILIPAUSKIS <b>CLAIMANT :</b> PAULETTE PILIPAUSKIS  2234 BIRDWOOD DR ORANGE PARK,FL 320735302	<b>AMOUNT CLAIMED :</b> \$493.72 <b>AMOUNT RECOMMENDED :</b> \$493.72 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$493.72
<b>COMPANY:</b> 547 <b>ID NO :</b> 1792-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139309 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> NAMITA JHA <b>CLAIMANT :</b> NAMITA JHA  7975 MONTEREY BAY DR JACKSONVILLE,FL 322562927	<b>AMOUNT CLAIMED :</b> \$447.98 <b>AMOUNT RECOMMENDED :</b> \$447.98 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$447.98

EXHIBIT A



FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1793-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139322 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> PHILLIP MARTIN <b>CLAIMANT :</b> PHILLIP MARTIN  261 SW NIGHTSHADE DR LAKE CITY,FL 320244802	<b>AMOUNT CLAIMED :</b> \$412.65 <b>AMOUNT RECOMMENDED :</b> \$412.65 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$412.65
<b>COMPANY:</b> 547 <b>ID NO :</b> 1794-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139346 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RAM & SANTOSH ARYA <b>CLAIMANT :</b> RAM & SANTOSH ARYA  190 SW PALM COVE DR PALM CITY,FL 349904322	<b>AMOUNT CLAIMED :</b> \$399.66 <b>AMOUNT RECOMMENDED :</b> \$399.66 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$399.66
<b>COMPANY:</b> 547 <b>ID NO :</b> 1795-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139369 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> TAMMILEA CHAMI <b>CLAIMANT :</b> TAMMILEA CHAMI  514 WILSHIRE DR CASSELBERRY,FL 327075429	<b>AMOUNT CLAIMED :</b> \$373.91 <b>AMOUNT RECOMMENDED :</b> \$373.91 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$373.91
<b>COMPANY:</b> 547 <b>ID NO :</b> 1796-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139438 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARION GRANT <b>CLAIMANT :</b> MARION GRANT  2278 ANCHORAGE LN APT B NAPLES,FL 341041203	<b>AMOUNT CLAIMED :</b> \$378.35 <b>AMOUNT RECOMMENDED :</b> \$378.35 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$378.35
<b>COMPANY:</b> 547 <b>ID NO :</b> 1797-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139522 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHRISTINE WILKINS <b>CLAIMANT :</b> CHRISTINE WILKINS  224 GILDA PL NW FORT WALTON BEACH,FL 325484202	<b>AMOUNT CLAIMED :</b> \$363.93 <b>AMOUNT RECOMMENDED :</b> \$363.93 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$363.93
<b>COMPANY:</b> 547 <b>ID NO :</b> 1798-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139523 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SUSAN BECKHAM <b>CLAIMANT :</b> SUSAN BECKHAM  1228 SE 21ST TER CAPE CORAL,FL 339906615	<b>AMOUNT CLAIMED :</b> \$453.97 <b>AMOUNT RECOMMENDED :</b> \$453.97 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$453.97

**EXHIBIT A**

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1799-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139568 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SEAN VARGYAI MARY GANTZ <b>CLAIMANT :</b> SEAN VARGYAI MARY GANTZ  1630 BAY HARBOR LN SARASOTA,FL 342313041	<b>AMOUNT CLAIMED :</b> \$494.45 <b>AMOUNT RECOMMENDED :</b> \$494.45 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$494.45
<b>COMPANY:</b> 547 <b>ID NO :</b> 1800-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139611 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> GREG FOLSTER <b>CLAIMANT :</b> GREG FOLSTER  14627 ASTINA WAY ORLANDO,FL 328377216	<b>AMOUNT CLAIMED :</b> \$29.97 <b>AMOUNT RECOMMENDED :</b> \$29.97 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$29.97
<b>COMPANY:</b> 547 <b>ID NO :</b> 1801-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139623 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RENARD & LAURA IARUSSI <b>CLAIMANT :</b> RENARD & LAURA IARUSSI  5200 N FLAGLER DR WEST PALM BEACH,FL 334072755	<b>AMOUNT CLAIMED :</b> \$323.00 <b>AMOUNT RECOMMENDED :</b> \$323.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$323.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1802-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139640 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARGARET POWERS <b>CLAIMANT :</b> MARGARET POWERS  12805 WOODBINE DR HUDSON,FL 346676914	<b>AMOUNT CLAIMED :</b> \$3.25 <b>AMOUNT RECOMMENDED :</b> \$3.25 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$3.25
<b>COMPANY:</b> 547 <b>ID NO :</b> 1803-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139707 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARK DUKAS <b>CLAIMANT :</b> MARK DUKAS  2309 W TEXAS AVE TAMPA,FL 336296235	<b>AMOUNT CLAIMED :</b> \$377.18 <b>AMOUNT RECOMMENDED :</b> \$377.18 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$377.18
<b>COMPANY:</b> 547 <b>ID NO :</b> 1804-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139724 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> SUSAN JACOBUS <b>CLAIMANT :</b> SUSAN JACOBUS  2808 CYNTHIA CT PANAMA CITY,FL 324057211	<b>AMOUNT CLAIMED :</b> \$350.07 <b>AMOUNT RECOMMENDED :</b> \$350.07 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$350.07

**EXHIBIT A**

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
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 FINAL CLAIMS REPORT  
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<b>COMPANY:</b> 547 <b>ID NO :</b> 1805-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139795 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> KARL HEURING <b>CLAIMANT :</b> KARL HEURING 8430 MARIA CT CAPE CANAVERAL,FL 329202686	<b>AMOUNT CLAIMED :</b> \$20.57 <b>AMOUNT RECOMMENDED :</b> \$20.57 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$20.57
<b>COMPANY:</b> 547 <b>ID NO :</b> 1806-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139939 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> STEPHANIE SIMMONS <b>CLAIMANT :</b> STEPHANIE SIMMONS 2124 UNIVERSITY DRIVE ORLANDO,FL 32804	<b>AMOUNT CLAIMED :</b> \$14.24 <b>AMOUNT RECOMMENDED :</b> \$14.24 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$14.24
<b>COMPANY:</b> 547 <b>ID NO :</b> 1807-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139940 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> STEPHANIE SIMMONS <b>CLAIMANT :</b> STEPHANIE SIMMONS 2118 UNIVERSITY DR ORLANDO,FL 32804	<b>AMOUNT CLAIMED :</b> \$14.24 <b>AMOUNT RECOMMENDED :</b> \$14.24 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$14.24
<b>COMPANY:</b> 547 <b>ID NO :</b> 1808-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW139999 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> BARRY LOPER <b>CLAIMANT :</b> BARRY LOPER 1861 53RD ST S GULFPORT,FL 337074257	<b>AMOUNT CLAIMED :</b> \$376.57 <b>AMOUNT RECOMMENDED :</b> \$376.57 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$376.57
<b>COMPANY:</b> 547 <b>ID NO :</b> 1809-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140027 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LAN FRONDA <b>CLAIMANT :</b> LAN FRONDA 8411 ANDES DR N JACKSONVILLE,FL 322446418	<b>AMOUNT CLAIMED :</b> \$327.17 <b>AMOUNT RECOMMENDED :</b> \$327.17 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$327.17
<b>COMPANY:</b> 547 <b>ID NO :</b> 1810-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140068 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DAVE MCLANE <b>CLAIMANT :</b> DAVE MCLANE 4809 JEANETTE CT SAINT CLOUD,FL 347714857	<b>AMOUNT CLAIMED :</b> \$562.42 <b>AMOUNT RECOMMENDED :</b> \$562.42 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$562.42

**EXHIBIT A**

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1811-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140102 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> LORI ANN BALL <b>CLAIMANT :</b> LORI ANN BALL  14832 SW 166TH ST MIAMI,FL 331871422	<b>AMOUNT CLAIMED :</b> \$550.00 <b>AMOUNT RECOMMENDED :</b> \$550.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$550.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1812-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140108 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> CHERYL KERSHAW <b>CLAIMANT :</b> CHERYL KERSHAW  3828 MISTY WAY DESTIN,FL 325412124	<b>AMOUNT CLAIMED :</b> \$368.88 <b>AMOUNT RECOMMENDED :</b> \$368.88 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$368.88
<b>COMPANY:</b> 547 <b>ID NO :</b> 1813-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140110 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DANIEL STEINBERGER <b>CLAIMANT :</b> DANIEL STEINBERGER  1751 W HEWETT RD SANTA ROSA BEACH,FL 324593329	<b>AMOUNT CLAIMED :</b> \$501.25 <b>AMOUNT RECOMMENDED :</b> \$501.25 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$501.25
<b>COMPANY:</b> 547 <b>ID NO :</b> 1814-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140131 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> DONALD SIMMONS <b>CLAIMANT :</b> DONALD SIMMONS  9705 HICKORY HOLLOW RD LOT 48 LEESBURG,FL 347889363	<b>AMOUNT CLAIMED :</b> \$15.15 <b>AMOUNT RECOMMENDED :</b> \$15.15 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$15.15
<b>COMPANY:</b> 547 <b>ID NO :</b> 1815-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140135 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RYAN O REILLY <b>CLAIMANT :</b> RYAN O REILLY  11029 LEGACY BLVD PALM BEACH GARDENS,FL 334103619	<b>AMOUNT CLAIMED :</b> \$329.93 <b>AMOUNT RECOMMENDED :</b> \$329.93 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$329.93
<b>COMPANY:</b> 547 <b>ID NO :</b> 1816-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140244 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> RAMZI DALLOO <b>CLAIMANT :</b> RAMZI DALLOO  5 EGAN DR PALM COAST,FL 321646277	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1817-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140334 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JULIE SMITH <b>CLAIMANT :</b> JULIE SMITH  456 W 10TH AVE MOUNT DORA,FL 327574229	<b>AMOUNT CLAIMED :</b> \$391.67 <b>AMOUNT RECOMMENDED :</b> \$391.67 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$391.67
<b>COMPANY:</b> 547 <b>ID NO :</b> 1818-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140458 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> NEIL SAPIN <b>CLAIMANT :</b> NEIL SAPIN  4660 OCEAN BLVD APT P1 SARASOTA,FL 342421352	<b>AMOUNT CLAIMED :</b> \$42.19 <b>AMOUNT RECOMMENDED :</b> \$42.19 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$42.19
<b>COMPANY:</b> 547 <b>ID NO :</b> 1819-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140497 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> ALAN VANDEVENDER <b>CLAIMANT :</b> ALAN VANDEVENDER  1108 BRANCHWOOD DR APOPKA,FL 327035951	<b>AMOUNT CLAIMED :</b> \$29.79 <b>AMOUNT RECOMMENDED :</b> \$29.79 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$29.79
<b>COMPANY:</b> 547 <b>ID NO :</b> 1820-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140532 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> MARK MOREHOUSE <b>CLAIMANT :</b> MARK MOREHOUSE  6245 S BEND SQ ORLANDO,FL 328074245	<b>AMOUNT CLAIMED :</b> \$400.55 <b>AMOUNT RECOMMENDED :</b> \$400.55 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$400.55
<b>COMPANY:</b> 547 <b>ID NO :</b> 1821-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140642 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> AMIT SINHA <b>CLAIMANT :</b> AMIT SINHA  16106 CONDOVER CT TAMPA,FL 336471042	<b>AMOUNT CLAIMED :</b> \$478.66 <b>AMOUNT RECOMMENDED :</b> \$478.66 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$478.66
<b>COMPANY:</b> 547 <b>ID NO :</b> 1822-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140855 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> JEAN J DRIVER <b>CLAIMANT :</b> JEAN J DRIVER  1819 SOUND HAMMOCK DR NAVARRE,FL 325667344	<b>AMOUNT CLAIMED :</b> \$679.98 <b>AMOUNT RECOMMENDED :</b> \$679.98 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$679.98

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1823-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140891 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 02/19/2015	<b>INSURED :</b> WENDY WAGER <b>CLAIMANT :</b> WENDY WAGER  129 BECKET LN LAKE MARY,FL 327464351	<b>AMOUNT CLAIMED :</b> \$32.84 <b>AMOUNT RECOMMENDED :</b> \$32.84 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$32.84
<b>COMPANY:</b> 547 <b>ID NO :</b> 1824-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW91600 <b>CLAIM NUMBER :</b> 1824 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 07/23/2015	<b>INSURED :</b> DIANA RUSSELL <b>CLAIMANT :</b> DIANA RUSSELL  5861 LAKE VICTORIA DR LAKELAND,FL 33813	<b>AMOUNT CLAIMED :</b> \$479.73 <b>AMOUNT RECOMMENDED :</b> \$479.73 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$479.73
<b>COMPANY:</b> 547 <b>ID NO :</b> 1825-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW82279 <b>CLAIM NUMBER :</b> 1825 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 07/21/2015	<b>INSURED :</b> JENNIFER RUSSELL <b>CLAIMANT :</b> JENNIFER RUSSELL  5861 LAKE VICTORIA DRI LAKELAND,FL 33813	<b>AMOUNT CLAIMED :</b> \$381.43 <b>AMOUNT RECOMMENDED :</b> \$381.43 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$381.43
<b>COMPANY:</b> 547 <b>ID NO :</b> 1826-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW74751 <b>CLAIM NUMBER :</b> 1826 <b>INS/CLMT STATE :</b> AL <b>DATE OF LOSS :</b> 08/17/2013 <b>DATE PROOF FILED :</b> 07/20/2015	<b>INSURED :</b> DEBORAH MILLER <b>CLAIMANT :</b> DEBORAH MILLER  1336 HIGHWAY 14 E UNIT 112 PRATTVILLE,AL 36066	<b>AMOUNT CLAIMED :</b> \$123.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1827-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW126756 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> PA <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 08/14/2015	<b>INSURED :</b> JESSICA RODICK <b>CLAIMANT :</b> JESSICA RODICK  6 GLENHURST RD SHREWSBURY,PA 17361	<b>AMOUNT CLAIMED :</b> \$736.05 <b>AMOUNT RECOMMENDED :</b> \$119.82 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$119.82
<b>COMPANY:</b> 547 <b>ID NO :</b> 1828-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW100471 <b>CLAIM NUMBER :</b> 1828 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 07/24/2015	<b>INSURED :</b> LINDA NEWBERRY <b>CLAIMANT :</b> LINDA NEWBERRY  3750 LEGHORN RD MALABAR,FL 32950	<b>AMOUNT CLAIMED :</b> \$2,656.36 <b>AMOUNT RECOMMENDED :</b> \$270.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$270.00

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1828-2 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW100471 <b>CLAIM NUMBER :</b> 1828 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 07/24/2015	<b>INSURED :</b> LINDA NEWBERRY <b>CLAIMANT :</b> LINDA NEWBERRY  3750 LEGHORN MALABAR,FL 32950	<b>AMOUNT CLAIMED :</b> \$2,656.36 <b>AMOUNT RECOMMENDED :</b> \$276.52 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$276.52
<b>COMPANY:</b> 547 <b>ID NO :</b> 1829-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW132779 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 08/12/2015	<b>INSURED :</b> DENNIS LYNDON <b>CLAIMANT :</b> DENNIS LYNDON  5070 SE BURNING TREE CIR STUART,FL 34997	<b>AMOUNT CLAIMED :</b> \$497.55 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1830-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW140738 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 07/20/2015	<b>INSURED :</b> JENNIFER RHEAUME <b>CLAIMANT :</b> JENNIFER RHEAUME  521 NORTHBRIDGE DR ALTAMONTE,FL 32714	<b>AMOUNT CLAIMED :</b> \$389.00 <b>AMOUNT RECOMMENDED :</b> \$44.42 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$44.42
<b>COMPANY:</b> 547 <b>ID NO :</b> 1831-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW92788 <b>CLAIM NUMBER :</b> 1831 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 07/31/2015	<b>INSURED :</b> JERALD THOMPSON <b>CLAIMANT :</b> JERALD THOMPSON  11224 CYPRESS TREE CIR FT MYERS,FL 33913	<b>AMOUNT CLAIMED :</b> \$4,174.09 <b>AMOUNT RECOMMENDED :</b> \$2,154.09 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$2,154.09
<b>COMPANY:</b> 547 <b>ID NO :</b> 1831-2 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW92788 <b>CLAIM NUMBER :</b> 1831 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 07/31/2015	<b>INSURED :</b> JERALD THOMPSON <b>CLAIMANT :</b> JERALD THOMPSON  11224 CYPRESS TREE CIRC FT MYERS,FL 33913	<b>AMOUNT CLAIMED :</b> \$4,174.09 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1832-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW121661 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 07/24/2015	<b>INSURED :</b> STEVE GRAZIAPLENE <b>CLAIMANT :</b> STEVE GRAZIAPLENE  14510 DUANE CT SPRING HILL,FL 34610	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$32.55 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$32.55

EXHIBIT A

SENSIBLE HOME WARRANTY, LLC

FINAL CLAIMS REPORT

PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547 <b>ID NO :</b> 1833-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW121663 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 07/24/2015	<b>INSURED :</b> STEVE GRAZIAPLENE <b>CLAIMANT :</b> STEVE GRAZIAPLENE  14510 DUANE CT SPRING HILL,FL 34610	<b>AMOUNT CLAIMED :</b> \$1.00 <b>AMOUNT RECOMMENDED :</b> \$32.55 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$32.55
<b>COMPANY:</b> 547 <b>ID NO :</b> 1834-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW101868 <b>CLAIM NUMBER :</b> 1834 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 06/09/2015	<b>INSURED :</b> RANDY & JILL CHASE <b>CLAIMANT :</b> RANDY & JILL CHASE  746 RAINFALL DRIVE WINTER GARDEN,FL 34787	<b>AMOUNT CLAIMED :</b> \$2,150.00 <b>AMOUNT RECOMMENDED :</b> \$1,858.02 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$1,858.02
<b>COMPANY:</b> 547 <b>ID NO :</b> 1834-2 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW101868 <b>CLAIM NUMBER :</b> 1834 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 06/09/2015	<b>INSURED :</b> RANDY & JILL CHASE <b>CLAIMANT :</b> RANDY & JILL CHASE  746 RAINFALL DRIVE WINTER GARDEN,FL 34787	<b>AMOUNT CLAIMED :</b> \$2,150.00 <b>AMOUNT RECOMMENDED :</b> \$0.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$0.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1835-1 <b>PRIORITY :</b> CLASS 2 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW101242 <b>CLAIM NUMBER :</b> 1835 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 08/03/2015	<b>INSURED :</b> AMBER SCHOELLER <b>CLAIMANT :</b> AMBER SCHOELLER  1300 SW 76 DRIVE GAINESVILLE,FL 32607	<b>AMOUNT CLAIMED :</b> \$4,460.00 <b>AMOUNT RECOMMENDED :</b> \$3,515.00 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$3,515.00
<b>COMPANY:</b> 547 <b>ID NO :</b> 1835-2 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW101242 <b>CLAIM NUMBER :</b> 1835 <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 08/03/2015	<b>INSURED :</b> AMBER SCHOELLER <b>CLAIMANT :</b> AMBER SCHOELLER  1300 SW 76 DRIVE GAINESVILLE,FL 32607	<b>AMOUNT CLAIMED :</b> \$4,460.00 <b>AMOUNT RECOMMENDED :</b> \$255.03 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$255.03
<b>COMPANY:</b> 547 <b>ID NO :</b> 1836-1 <b>PRIORITY :</b> CLASS 3 <b>STATUS :</b> Evaluated	<b>POLICY NUMBER :</b> SHW102570 <b>CLAIM NUMBER :</b> <b>INS/CLMT STATE :</b> FL <b>DATE OF LOSS :</b> 02/19/2015 <b>DATE PROOF FILED :</b> 08/14/2015	<b>INSURED :</b> WILLIAM & SUSAN ALBERS <b>CLAIMANT :</b> WILLIAM & SUSAN ALBERS  7271 MANATEE STREET NAVARRE,FL 32566	<b>AMOUNT CLAIMED :</b> \$454.00 <b>AMOUNT RECOMMENDED :</b> \$34.78 <b>AMOUNT GUARANTY PAID :</b> \$0.00 <b>AMOUNT RECMD CLAIMANT :</b> \$34.78

EXHIBIT A



FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
 PART A - FOR NON GUARANTY ASSOCIATION CLAIMANTS

<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW125322	<b>INSURED :</b> DIANA GUILLEN	<b>AMOUNT CLAIMED :</b>	\$702.61
<b>ID NO :</b> 1837-1	<b>CLAIM NUMBER :</b> 1837	<b>CLAIMANT :</b> DIANA GUILLEN	<b>AMOUNT RECOMMENDED :</b>	
<b>PRIORITY :</b> CLASS 8	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	
<b>STATUS :</b> Unevaluated	<b>DATE OF LOSS :</b> 02/19/2015	10810 LAKESIDE VISTA DR	<b>AMOUNT RECMD CLAIMANT :</b>	
	<b>DATE PROOF FILED :</b> 08/21/2015	RIVERVIEW,FL 33569		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW132779	<b>INSURED :</b> DENNIS LYNDON	<b>AMOUNT CLAIMED :</b>	\$225.00
<b>ID NO :</b> 1838-1	<b>CLAIM NUMBER :</b> 1838	<b>CLAIMANT :</b> ADVANCED PLUMBING OF MARTIN COUNTY	<b>AMOUNT RECOMMENDED :</b>	\$225.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	792 SW FALCON ST	<b>AMOUNT RECMD CLAIMANT :</b>	\$225.00
	<b>DATE PROOF FILED :</b> 08/17/2015	PALM CITY,FL 34990		
<b>COMPANY:</b> 547	<b>POLICY NUMBER :</b> SHW129281	<b>INSURED :</b> SERGEI PAROMCHIK	<b>AMOUNT CLAIMED :</b>	\$2,575.00
<b>ID NO :</b> 1839-1	<b>CLAIM NUMBER :</b> 1839	<b>CLAIMANT :</b> SERGEI PAROMCHIK	<b>AMOUNT RECOMMENDED :</b>	\$2,485.00
<b>PRIORITY :</b> CLASS 2	<b>INS/CLMT STATE :</b> FL		<b>AMOUNT GUARANTY PAID :</b>	\$0.00
<b>STATUS :</b> Evaluated	<b>DATE OF LOSS :</b> 02/19/2015	27552 BREAKERS DR	<b>AMOUNT RECMD CLAIMANT :</b>	\$2,485.00
	<b>DATE PROOF FILED :</b> 02/19/2015	WESLEY CHAPEL,FL 33544		

EXHIBIT A

FLORIDA DEPARTMENT OF FINANCIAL SERVICES -DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 FINAL CLAIMS REPORT  
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SUMMARY TOTALS

TOTAL AMOUNT CLAIMED BY NON GUARANTY ASSOCIATION CLAIMANTS	\$82,086.12
TOTAL AMOUNT RECOMMENDED TO NON GUARANTY ASSOCIATION CLAIMANTS	\$142,238.58
TOTAL NUMBER	843

**Secured Claims**

COUNT OF SECURED CLAIMS :	0
AMOUNT CLAIMED FOR SECURED CLAIMS BY NON GUARANTY ASSOCIATION	\$0.00
AMOUNT RECMD FOR SECURED CLAIMS TO NON GUARANTY ASSOCIATION	

**UnSecured Claims**

COUNT OF CLASS 1 CLAIMS :	0	COUNT OF CLASS 7 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 1 CLAIMS BY NON GUARANTY ASSOCIATION	\$0.00	AMOUNT CLAIMED FOR CLASS 7 CLAIMS BY NON GUARANTY ASSOCIATION	\$0.00
AMOUNT RECMD FOR CLASS 1 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS :		AMOUNT RECMD FOR CLASS 7 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	
COUNT OF CLASS 2 CLAIMS :	659	COUNT OF CLASS 8 CLAIMS :	1
AMOUNT CLAIMED FOR CLASS 2 CLAIMS BY NON GUARANTY ASSOCIATION	\$17,874.61	AMOUNT CLAIMED FOR CLASS 8 CLAIMS BY NON GUARANTY ASSOCIATION	\$702.61
AMOUNT RECMD FOR CLASS 2 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	\$96,833.08	AMOUNT RECMD FOR CLASS 8 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	
COUNT OF CLASS 3 CLAIMS :	183	COUNT OF CLASS 9 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 3 CLAIMS BY NON GUARANTY ASSOCIATION	\$63,508.90	AMOUNT CLAIMED FOR CLASS 9 CLAIMS BY NON GUARANTY ASSOCIATION	\$0.00
AMOUNT RECMD FOR CLASS 3 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	\$45,405.50	AMOUNT RECMD FOR CLASS 9 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:	
COUNT OF CLASS 4 CLAIMS :	0	CLASS 10 INTEREST CLAIMS (SEE NOTE):	
AMOUNT CLAIMED FOR CLASS 4 CLAIMS BY NON GUARANTY ASSOCIATION	\$0.00		
AMOUNT RECMD FOR CLASS 4 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:			
COUNT OF CLASS 5 CLAIMS :	0	COUNT OF CLASS 11 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 5 CLAIMS BY NON GUARANTY ASSOCIATION	\$0.00	AMOUNT CLAIMED FOR CLASS 11 CLAIMS TO NON GUARANTY ASSOCIATION	\$0.00
AMOUNT RECMD FOR CLASS 5 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS:		AMOUNT RECMD FOR CLASS 11 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS	
COUNT OF CLASS 6 CLAIMS :	0		
AMOUNT CLAIMED FOR CLASS 6 CLAIMS BY NON GUARANTY ASSOCIATION	\$0.00		
AMOUNT RECMD FOR CLASS 6 CLAIMS TO NON GUARANTY ASSOCIATION CLAIMANTS :			

Note: Class 10 Claims are comprised of interest per F.S. 631.271 (1) (j) on allowed claims in Classes 1 - 9.

FLORIDA DEPARTMENT OF FINANCIAL SERVICES-DIVISION OF REHABILITATION AND LIQUIDATION  
 SENSIBLE HOME WARRANTY, LLC  
 CLAIMS DISTRIBUTION REPORT

**SUMMARY TOTALS**

TOTAL AMOUNT CLAIMED	\$17,304.61
TOTAL AMOUNT RECOMMENDED	\$96,833.08
TOTAL NUMBER	211

**Secured Claims**

COUNT OF SECURED CLAIMS :	0
AMOUNT CLAIMED FOR SECURED CLAIMS :	
AMOUNT RECOMMENDED FOR SECURED CLAIMS :	

**Unsecured Claims**

COUNT OF CLASS 1 CLAIMS :	0	COUNT OF CLASS 7 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 1 CLAIMS :		AMOUNT CLAIMED FOR CLASS 7 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 1 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 7 CLAIMS :	
COUNT OF CLASS 2 CLAIMS :	211	COUNT OF CLASS 8 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 2 CLAIMS :	\$17,304.61	AMOUNT CLAIMED FOR CLASS 8 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 2 CLAIMS :	\$96,833.08	AMOUNT RECOMMENDED FOR CLASS 8 CLAIMS :	
COUNT OF CLASS 3 CLAIMS :	0	COUNT OF CLASS 9 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 3 CLAIMS :		AMOUNT CLAIMED FOR CLASS 9 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 3 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 9 CLAIMS :	
COUNT OF CLASS 4 CLAIMS :	0	CLASS 10 INTEREST CLAIMS (SEE NOTE):	
AMOUNT CLAIMED FOR CLASS 4 CLAIMS :			
AMOUNT RECOMMENDED FOR CLASS 4 CLAIMS :			
COUNT OF CLASS 5 CLAIMS :	0	COUNT OF CLASS 11 CLAIMS :	0
AMOUNT CLAIMED FOR CLASS 5 CLAIMS :		AMOUNT CLAIMED FOR CLASS 11 CLAIMS :	
AMOUNT RECOMMENDED FOR CLASS 5 CLAIMS :		AMOUNT RECOMMENDED FOR CLASS 11 CLAIMS :	
COUNT OF CLASS 6 CLAIMS :	0		
AMOUNT CLAIMED FOR CLASS 6 CLAIMS :			
AMOUNT RECOMMENDED FOR CLASS 6 CLAIMS :			

Note: Class 10 Claims are comprised of interest per F.S. 631.271 (1) (j) on allowed claims in Classes 1 - 9.

**Sensible Home Warranty  
Distribution Accounting  
Projected for a March 2016 Distribution**

**ESTIMATED ASSETS**

	<u>Value</u>	<u>Reference</u>
Cash	\$ 46,779.31	Schedule A
Accrued Interest to be paid	40.00	Schedule D
<b>Total Assets</b>	<b>\$ 46,819.31</b>	

**ESTIMATED FUNDS RETAINAGE**

	<u>Value</u>	<u>Reference</u>
Estimate - Regulatory Trust Fund Advance with interest	20,175.00	
Class I - Administrative Claims Retainage for Receiver Expenses Estimate (March 2016 - June 2016 )	11,440.00	Schedule B
Discharge Expenses Final tax returns	300.00	
<b>Total Proposed Retainage</b>	<b>31,915.00</b>	

**TOTAL AVAILABLE TO DISTRIBUTE** **\$ 14,904.31**

**DISTRIBUTION RECOMMENDATION**

	<u>Claims Value</u>	<u>Less Previous Claims Distributions</u>	<u>Value of Claims Outstanding</u>	<u>Apply Adv. Pmts. to Guaranty Assoc.</u>	<u>Recommended Distribution</u>	<u>% of O/S Claims Value</u>
Class I - Administrative Claims-Guaranty Funds	\$ -	\$ -	\$ -	<del>-\$ -</del>	\$ -	100.0000%
Class II - Loss Claims-Guaranty Funds	-	-	-	<del>-\$ -</del>	-	15.3918%
Class II - Loss Claims-Other	96,833.08	-	96,833.08	<del>-\$ -</del>	14,904.31	15.3918%
Class III - Return Premium Claims-Guaranty Funds	-	-	-	<del>-\$ -</del>	-	0.0000%
Class III - Return Premium Claims-Other	45,405.50	-	45,405.50	<del>-\$ -</del>	-	0.0000%
Class IV - Federal Government Claims	-	-	-	<del>-\$ -</del>	-	0.0000%
Class V - Employee Claims	-	-	-	<del>-\$ -</del>	-	0.0000%
Class VI - General Creditors Claims-Guaranty Funds	-	-	-	<del>-\$ -</del>	-	0.0000%
Class VI - General Creditors Claims-Other	-	-	-	<del>-\$ -</del>	-	0.0000%
Class VII - State & Local Government Claims	-	-	-	<del>-\$ -</del>	-	0.0000%
Class VIII - Late Filed Claims	702.61	-	702.61	<del>-\$ -</del>	-	0.0000%
Class IX - Surplus/Other-GA	-	-	-	<del>-\$ -</del>	-	0.0000%
Claims Not Prioritized	-	-	-	<del>-\$ -</del>	-	0.0000%
<b>Totals</b>	<b>\$ 142,941.19</b>	<b>\$ -</b>	<b>\$ 142,941.19</b>	<b>\$ -</b>	<b>\$ 14,904.31</b>	

**Index to Attached Schedules:**

- Schedule A - Available Cash Projection
- Schedule B - Estimated Retainage for Receiver Pre-Discharge Expenses
- Schedule C - Allocated State Funds Expensed
- Schedule D - Interest Earnings Projection
- Schedule E - Receiver Discharge Expenses

**Sensible Home Warranty**  
**Available Cash Projection**  
**Estimated from 02/01/2016 through the Projected Distribution in March 2016**

	Cash Balance as of January 31, 2016	Feb-16
<b>Beginning Cash Balance</b>		\$ 51,849.31
<b>Direct Receiver Expenses (Actual or Estimated)</b>		
Rent-Storage & Utilities, Claims Evaluation Services and Investment Charges		-
<b>Sub-total</b>		-
<b>Allocated Receiver Expenses (Estimated)</b>		
Labor & Benefits		5,100.00 <sup>1</sup>
Indirect Expenses		10.00 <sup>2</sup>
<b>Sub-total</b>		<b>5,110.00</b>
<b>Cash Balance Before Interest Earnings</b>		<b>46,739.31</b>
<b>Interest Earnings</b>		
Actual SPIA Earnings for January to be received on 02/01/2016		40.00
Estimate based on assumed SPIA APR on the previous month's average Pooled Cash balance (See Schedule D).		
<b>Ending Cash Balance</b>	<b>\$ 51,849.31</b>	<b>\$ 46,779.31</b>

**Assumptions for Allocated Receiver Expenses:**

<sup>1</sup> Labor & Benefits: This estimate is based on Actual February hours as of 3/2/16.

<sup>2</sup> Indirect Expenses: This estimate is Sensible's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on Sensible's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

Estimated Total Asset %	0.01%
Estimated Total for the Receiver	\$ 100,000.00
Estimated Expense (rounded)	\$ 10.00

**Sensible Home Warranty**  
**Estimated Funds to be Retained by the Receiver**  
 Estimated from 02/29/2016 through the Projected Discharge Date of 06/30/2016

	Projected as of 29-Feb-16	March - June	Retainage Calculation
<b>Beginning Cash Balance</b>		\$ 46,779.31	
<b>Direct Receiver Expenses</b>			
Postage		400.00	
<b>Sub-total</b>		<u>400.00</u>	\$ 400.00
<b>Allocated Receiver Expenses</b>			
Labor & Benefits		11,000.00 <sup>1</sup>	
Indirect Expenses		40.00 <sup>2</sup>	
<b>Sub-total</b>		<u>11,040.00</u>	\$ 11,040.00
<b>Claims Distribution (Approx.)</b>		<u>\$ 14,904.31</u>	
<b>Cash Balance Before Interest Earnings</b>		20,435.00	
<b>Interest Earnings</b>			
Estimate based on assumed SPIA APR on the previous month's average Pooled Cash balance (See Schedule D).			\$ -
<b>Projected Ending Cash Balance</b>	\$ 46,779.31	<u>\$ 20,435.00</u>	
		<b>Estimated Retainage</b>	<u>\$ 11,440.00</u> <sup>3</sup>

**Assumptions for Allocated Receiver Expenses:**

<sup>1</sup> Labor & Benefits: This estimate is based projected staff hours for March - June

<sup>2</sup> Indirect Expenses: This estimate is Sensible's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on Sensible's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

Estimated Total Asset %	0.01%
Estimated Total for the Receiver	\$ 100,000.00
Estimated Expense (rounded)	<u>\$ 10.00</u>

<sup>3</sup> The February 2016 interest is not included in the 'Estimated Retainage' since it is included as Accrued Interest in the Estimated Assets section of the Distribution Accounting dated for March 2016.

**Sensible Home Warranty****Allocated State Funds Expensed**

Estimated from 02/01/2016 through the Projected Discharge Date of 06/30/16

**THIS STATEMENT INCLUDED FOR INFORMATION PURPOSES ONLY - AMOUNTS NOT PART OF DISTRIBUTION CALCULATION**

	<u>Feb-16</u>	<u>Mar-16</u>	<u>Apr-16</u>	<u>May-16</u>	<u>Jun-16</u>	<u>Totals</u>
<b>Accrued Allocated State of Florida Expenses (Estimated)</b>						
Labor & Benefits	\$ -	\$ -	\$ -	\$ -	\$ -	<sup>1</sup> \$ -
Indirect Expenses	-	-	-	-	-	<sup>2</sup> \$ -
<b>Total</b>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u> <sup>3</sup>

**Assumptions for Allocated State of Florida Expenses:**

<sup>1</sup> Labor & Benefits: This estimate is based on a four month actual average doubled for increased labor activity during the distribution period.

October Actual	-
November Actual	-
December Actual	-
January Actual	-
Sub-total	<u>-</u>
4 mth. actual avg (rounded)	<u>-</u>
Doubled for incr dist activity	<u>\$ -</u>

<sup>2</sup> Indirect Expenses: This estimate is Sensible's estimated pro rata share of the Receiver's estimated total indirect expenses. The pro rata share calculation is based on Sensible's estimated total assets divided by the Receiver's estimated total assets for all receiverships.

Estimated Total Asset %	0.01%
Estimated Total for the State	<u>\$ 15,000.00</u>
Estimated Expense (rounded)	<u>\$ -</u>

<sup>3</sup> Per current Receiver policies and procedures, these accumulated amounts are recorded directly against estate equity as opposed to a liability account.

**Sensible Home Warranty**  
**Interest Earnings Projection**  
**Estimated from 02/01/2016 through the Projected Discharge Date of 06/30/2016**

**Interest accrued for February**

Beginning cash balance at 02/01/2016	\$ 51,849.31
Ending cash balance at 02/29/2016	\$ 46,779.31
Average cash balance for February	49,314.31
Assumed SPIA interest rate (Annualized)	1.00%
Subtotal (Annualized)	493.14

**Accrual for February (Rounded) \$ 40.00**

**Interest accrued for March**

Beginning cash balance at 03/01/2016	\$ 46,779.31
Ending cash balance at 03/31/2016	\$ 20,435.00
Average cash balance for March	33,607.16
Assumed SPIA interest rate (Annualized)	1.00%
Subtotal (Annualized)	336.07

**Accrual for March (Rounded) \$ 30.00**

**Interest accrued for April**

Beginning cash balance at 04/01/2016	No Interest is being calculated for these months as the cash balance will drop to almost 0 after the distribution is made.
Ending cash balance at 04/30/2016	
Average cash balance for April	
Assumed SPIA interest rate (Annualized)	
Subtotal (Annualized)	

**Accrual for April (Rounded)**

**Interest accrued for May**

Beginning cash balance at 05/01/2016	
Ending cash balance at 05/31/2016	
Average cash balance for May	
Assumed SPIA interest rate (Annualized)	
Subtotal (Annualized)	

**Accrual for May (Rounded)**

**Interest accrued for June**

Beginning cash balance at 06/01/2016	
Ending cash balance at 06/30/2016	
Average cash balance for June	
Assumed SPIA interest rate (Annualized)	
Subtotal (Annualized)	

**Accrual for June (Rounded)**



**Sensible Home Warranty  
Receiver Discharge Expenses  
Post June 2016**

**Discharge Expenses (Projected)**  
Final Tax Returns for 2015-2016  
**Total**

\$ 300.00  
**\$ 300.00**