

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 839735

FILED  
Apr 19, 2010  
Secretary of State

**Entity Name:** AMERIN GUARANTY CORPORATION

**Current Principal Place of Business:**

1601 MARKET STREET  
PHILADELPHIA, PA 19103 US

**New Principal Place of Business:**

**Current Mailing Address:**

1601 MARKET STREET  
PHILADELPHIA, PA 19103 US

**New Mailing Address:**

**FEI Number:** 23-1922977      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KARLEN, SUSAN  
1419 HOLLEMAN DRIVE  
VALRICO, FL 33594 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: BRYCE, TERESA  
Address: 731 S. HICKS STREET  
City-St-Zip: PHILADELPHIA, PA 19146

Title: CFOE  
Name: QUINT, C. ROBERT  
Address: 15 PIKES WAY  
City-St-Zip: CHELTENHAM, PA 19012

Title: S  
Name: HUNTER, TIMOTHY  
Address: 1009 ANNIN ST  
City-St-Zip: PHILADELPHIA, PA 19147

Title: T  
Name: LATIMER, TERRY  
Address: 909 PINEVIEW DRIVE  
City-St-Zip: WEST CHESTER, PA 19380

Title: V  
Name: RADICIONI, ROBERT  
Address: 3033 ARROW HEAD LANE  
City-St-Zip: PLYMOUTH MTS, PA 19462

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT RADICIONI

S VP

04/19/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date