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PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

TRIAD GUARANTY INSURANCE CORPORATION



DOCUMENT # P16395 (6)

1. Corporation Name

TRIAD GUARANTY INSURANCE CORPORATION



Principal Place of Business

101 SOUTH STRATFORD ROAD
SUITE 500
WINSTON-SALEM NC 27104

Mailing Address

101 S STRATFORD RD., STE. 500
P O BOX 2300 (27102)
WINSTON-SALEM NC 27104-4224
US

3. Date Incorporated or Qualified
10/15/1987

3a. Date of Last Report
03/16/1995

4. FEI Number
56-1570971

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

Suite 500

21. SAME

26. 101 S. Stratford rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. City & State

27. P.O. Box 2300 (27102)

City & State

23. City & State

28. Winston-Salem, NC

24. Zip

Country

29. Zip

27104-4224

30. Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLORIDA COMMISSIONER OF INSURANCE
THE CAPITAL BLDG.
TALLAHASSEE FL 32399-0300

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature not necessary when no change)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME THOMPSON, DARRYL W.
STREET ADDRESS 2823 GATESHEAD DRIVE
CITY-STATE-ZIP WINSTON-SALEM NC ☐ DELETE

TITLE VS
NAME BONO, ROBERT M.
STREET ADDRESS 520-Y PARK RIDGE CT.
CITY-STATE-ZIP WINSTON-SALEM NC ☐ DELETE

TITLE V
NAME FREEMAN, HENRY B.
STREET ADDRESS 330 STEED CT.
CITY-STATE-ZIP WINSTON-SALEM NC ☐ DELETE

TITLE V
NAME LUMMUS, F. EDWARD
STREET ADDRESS 519 CHATEAUGAY LANE
CITY-STATE-ZIP ATLANTA GA ☐ DELETE

TITLE D
NAME DAVIS, PERRY
STREET ADDRESS 230 SHERIDAN LANE
CITY-STATE-ZIP BIRMINGHAM AL ☐ DELETE

TITLE D
NAME SCHUTZBACH, JEROME F.
STREET ADDRESS 511 N. WILLOW ST.
CITY-STATE-ZIP EFFINGHAM IL ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert M. Bono

910-723-1282

CR2E034 (12/95)

TRIAD GUARANTY INSURANCE CORPORATION
OFFICERS & DIRECTORS

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS</u>	<u>CITY</u>	<u>ST</u>	<u>ZIP</u>
P/D	THOMPSON, DARRYL W.	2823 GATESHEAD DRIVE	WINSTON-SALEM,	NC	27106
V/D	WILLIAMS, JOHN H. JR	2729 REYNOLDS DRIVE	WINSTON-SALEM,	NC	27104
V/S	BONO, ROBERT M.	520-Y PARK RIDGE COURT	WINSTON-SALEM,	NC	27104
V	FREEMAN, HENRY B.	330 STEED COURT	WINSTON-SALEM,	NC	27106
V	KESSINGER, RONNIE D.	PO BOX 39	ADVANCE,	NC	27006
V	LUMMUS, F. EDWARD	519 CHATEAUGAY LANE	ATLANTA,	GA	30342
V/D	RATLIFF, JAMES K.	46 GREENWAY ROAD	BIRMINGHAM,	AL	35213
V/D	RATLIFF, WILLIAM T. JR	2621 ALTADENA ROAD	BIRMINGHAM,	AL	35243
V	WALL, CHARLES W.	676 IDLEWILD CIRCLE	BIRMINGHAM,	AL	35205
V/D	WHITEHURST, DAVID W.	3504 COUNTRYWOOD LANE	BIRMINGHAM,	AL	35243
C/D	RATLIFF, WILLIAM T. III	4319 OVERLOOK ROAD	BIRMINGHAM,	AL	35205
D	DAVIS, PERRY E.	230 SHERIDAN LANE	BIRMINGHAM,	AL	35216
D	DAVIS, HOWARD A.	1032 ROYAL BOMBAY COURT	NAPERVILLE,	IL	60563
D	WILLIAMS, CRAIG G. SR.	416 N MICHIGAN	BELLEVILLE,	IL	62221
D	NIXON, JOHN T.	3624 ROCKHILL ROAD	BIRMINGHAM,	AL	35223
D	SCHUTZBACH, JEROME F.	511 N. WILLOW STREET	EFFINGHAM,	IL	62401
V	PHILLIPS, ROLAND A.	6001 MUIRFIELD DRIVE	GREENSBORO,	NC	27410
V	OSWALT, MICHAEL R.	508 COVE HOLLOW CIRCLE	BIRMINGHAM,	AL	35244
V	DOAN, LOREN WAYNE	5505 HARBOR TOWN DRIVE	DALLAS	TX	75287

C- CHAIRMAN
P- PRESIDENT
V- VICE PRESIDENT
S- SECRETARY
D- DIRECTOR
AS- ASSISTANT SECRETARY

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