

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000100541

Entity Name: CUSTEGRA GUARANTY, INC.

Current Principal Place of Business:

5215 N. O'CONNOR BOULEVARD
SUITE 1200
IRVING, TX 75039

Current Mailing Address:

5215 N. O'CONNOR BOULEVARD
SUITE 1200
IRVING, TX 75039

FEI Number: 26-1109326

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
C/O C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEOP
Name TEREK, DAVID M
Address 5215 N. O'CONNOR BOULEVARD,
 SUITE 1200
City-State-Zip: IRVING TX 75039

Title SVP
Name SNYDER, DAVID B
Address 5215 N. O'CONNOR BOULEVARD,
 SUITE 1200
City-State-Zip: IRVING TX 75039

Title GCS
Name SNYDER, DAVID B
Address 5215 N. O'CONNOR BOULEVARD,
 SUITE 1200
City-State-Zip: IRVING TX 75039

Title CFOT
Name LUKASH, JEFF J
Address 5215 N. O'CONNOR BOULEVARD,
 SUITE 1200
City-State-Zip: IRVING TX 75039

Title D
Name TEREK, DAVID M
Address 5215 N. O'CONNOR BOULEVARD,
 SUITE 1200
City-State-Zip: IRVING TX 75039

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

SIGNATURE: DAVID B. SNYDER

SECRETARY

04/18/2013

Electronic Signature of Signing Officer/Director Detail

Date