

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 827221

Entity Name: AMBAC ASSURANCE CORPORATION

Current Principal Place of Business:

ONE STATE STREET PLAZA
NEW YORK, NY 10004

Current Mailing Address:

ONE STATE STREET PLAZA
ATTN: BONGI ZUNGU
NEW YORK, NY 10004 US

FEI Number: 39-1135174

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
P O BOX 6200 (32314-6200)
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000 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 PCEO
Name LEBLANC, CLAUDE
Address ONE STATE STREET PLAZA
City-State-Zip: NEW YORK NY 10004

Title CFOT
Name TRICK, DAVID
Address ONE STATE STREET PLAZA
City-State-Zip: NEW YORK NY 10004

Title SMDG
Name KSENAK, STEPHEN
Address ONE STATE STREET PLAZA
City-State-Zip: NEW YORK NY 10004

Title CSEC
Name WHITE, WILLIAM J
Address ONE STATE STREET PLAZA
City-State-Zip: NEW YORK NY 10004

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: WILLIAM WHITE

**CORPORATE
SECRETARY**

01/29/2018

Electronic Signature of Signing Officer/Director Detail

Date