

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 839735

**Entity Name:** RADIAN MORTGAGE ASSURANCE INC.

**Current Principal Place of Business:**

1601 MARKET STREET  
PHILADELPHIA, PA 19103

**Current Mailing Address:**

1601 MARKET STREET  
PHILADELPHIA, PA 19103 US

**FEI Number:** 23-1922977

**Certificate of Status Desired:** No

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

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 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 P  
Name BRYCE BAZEMORE, TERESA  
Address 731 S. HICKS STREET  
City-State-Zip: PHILADELPHIA PA 19146

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

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

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

Title V  
Name RADICIONI, ROBERT  
Address 3033 ARROW HEAD LANE  
City-State-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

**SENIOR VICE PRESIDENT 04/24/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date