2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000001742

Entity Name: MUNICIPAL ASSURANCE CORP.

Current Principal Place of Business:

31 WEST 52ND STREET NEW YORK, NY 10019

Current Mailing Address:

31 WEST 52ND STREET NEW YORK, NY 10019 US

FEI Number: 26-2999764 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

FILED Apr 27, 2015

Secretary of State

CC4261645507

Officer/Director Detail :

Title CHAIRMAN, CEO, PRESIDENT Title DIRECTOR, CFO FREDERICO, DOMINIC J Name Name BAILENSON, ROBERT A 31 WEST 52ND STREET Address 31 WEST 52ND STREET Address

NEW YORK NY 10019 NEW YORK NY 10019 City-State-Zip: City-State-Zip:

Title DIRECTOR, TREASURER Title DIRECTOR, SECRETARY, GENERAL

COUNSEL Name PASTON, DONALD H

MICHENER, JAMES M Name Address 31 WEST 52ND STREET

31 WEST 52ND STREET Address NEW YORK NY 10019 City-State-Zip:

City-State-Zip: NEW YORK NY 10019

Title DIRECTOR, CHIEF SURVEILLANCE **OFFICER** Title

DIRECTOR, CHIEF RISK OFFICER

Name BREWER, RUSSELL B II ALBERT, HOWARD W Name Address 31 WEST 52ND STREET Address 31 WEST 52ND STREET NEW YORK NY 10019

City-State-Zip: City-State-Zip: NEW YORK NY 10019

Title DIRECTOR, EXECUTIVE OFFICER DIRECTOR, CHIEF CREDIT OFFICER Title

Name STERN. BRUCE E Name DONNARUMMA, STEPHEN

Address 31 WEST 52ND STREET 31 WEST 52ND STREET Address

City-State-Zip: NEW YORK NY 10019 City-State-Zip: NEW YORK NY 10019

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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.

04/27/2015 SIGNATURE: DANA DAMIANI ASST. SECRETARY, COUNSEL

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title ASST. SECRETARY, COUNSEL Title ASST. SECRETARY, COUNSEL

Name DUFFY, WILLIAM B Name DAMIANI, DANA

Address 31 WEST 52ND STREET Address 31 WEST 52ND STREET

City-State-Zip: NEW YORK NY 10019 City-State-Zip: NEW YORK NY 10019

Title DIRECTOR, ASST. SECRETARY, DEPUTY

GENERAL COUNSEL

Name CHOW, LING

Address 31 WEST 52ND STREET
City-State-Zip: NEW YORK NY 10019