### 2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P15680

**Entity Name: MORTGAGE GUARANTY INSURANCE CORPORATION** 

**FILED** Mar 28, 2016 **Secretary of State** CC1078696925

# **Current Principal Place of Business:**

250 EAST KILBOURN AVENUE REGULATORY RELATIONS DEPT. MILWAUKEE, WI 53202

## **Current Mailing Address:**

P.O. BOX 756 REGULATORY RELATIONS DEPT. MILWAUKEE, WI 53201 US

FEI Number: 39-1324718 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

Officer/Director Detail:

Title **VGCS** Title P, CEO, D

Name LANE, JEFFREY H Name SINKS, PATRICK

Address 250 EAST KILBOURN AVENUE Address 250 EAST KILBOURN AVENUE

City-State-Zip: MILWAUKEE WI 53202 City-State-Zip: MILWAUKEE WI 53202

Title SVP Title **EVP AND CHIEF FINANCIAL OFFICER** 

Name ZIMMERMAN, MICHAEL J. Name MATTKE, TIMOTHY J

Address 250 EAST KILBOURN AVENUE Address 250 EAST KILBOURN AVENUE REGULATORY RELATIONS DEPT.

REGULATORY RELATIONS DEPT.

City-State-Zip: MILWAUKEE WI 53202 City-State-Zip: MILWAUKEE WI 53202

Title SVP Title SVP

Name GALLAS, CARLA A. CHI, GREGORY A. Name

250 EAST KILBOURN AVENUE Address 250 EAST KILBOURN AVENUE Address REGULATORY RELATIONS DEPT. REGULATORY RELATIONS DEPT.

City-State-Zip: MILWAUKEE WI 53202 MILWAUKEE WI 53202 City-State-Zip:

VP, ASST. GEN. COUNSEL, ASST. Title Title VP, ASST. GEN. COUNSEL, ASST. SECRETARY **SECRETARY** 

HEYRMAN, HEIDI A. Name STILWELL, DAN D Name

250 EAST KILBOURN AVENUE Address 250 EAST KILBOURN AVENUE Address

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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.

03/28/2016 VΡ SIGNATURE: DAN D. STILWELL

Date

### Officer/Director Detail Continued:

Title VICE PRESIDENT - CONTROLLER & CHIEF

ACCTG. OFFICER

Name SPERBER, JULIE K.

Address 250 EAST KILBOURN AVENUE

REGULATORY RELATIONS DEPT.

City-State-Zip: MILWAUKEE WI 53202

Title SVP

Name HUGHES, JAMES J.

Address 250 EAST KILBOURN AVENUE

REGULATORY RELATIONS DEPT.

City-State-Zip: MILWAUKEE WI 53202

Title SVP

Name THOMAS, KURT J.

Address 250 EAST KILBOURN AVENUE

REGULATORY RELATIONS DEPT.

City-State-Zip: MILWAUKEE WI 53202

Title VPT

Name PENDERGAST, LISA M.

Address 250 EAST KILBOURN AVENUE

REGULATORY RELATIONS DEPT.

City-State-Zip: MILWAUKEE WI 53202

Title SVP

Name DILWEG, SEAN A.

Address 250 EAST KILBOURN AVENUE

REGULATORY RELATIONS DEPT.

City-State-Zip: MILWAUKEE WI 53202

Title SVP

Name MIOSI, SALVATORE A.

Address 250 EAST KILBOURN AVENUE

REGULATORY RELATIONS DEPT.

City-State-Zip: MILWAUKEE WI 53202

Title AVP

Name BURNS, CHRISTOPHER E.

Address 250 EAST KILBOURN AVENUE

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