

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23660

Entity Name: UNITED GUARANTY MORTGAGE INDEMNITY COMPANY**Current Principal Place of Business:**230 N ELM STREET
GREENSBORO, NC 27401**Current Mailing Address:**230 N ELM STREET
GREENSBORO, NC 27401**FEI Number:** 42-0994960**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COLEMAN, LYNETTE
C/O CORPORATION SERVICE COMPANY
1201 HAYS STREET, SUITE 105
TALLAHASSEE, FL 32301 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	PRESIDENT
Name	DEMAIO, DONNALEE A
Address	230 N ELM STREET
City-State-Zip:	GREENSBORO NC 27401

Title	SVP, GENERAL COUNSEL
Name	MILLARD, SARA F
Address	230 N ELM STREET
City-State-Zip:	GREENSBORO NC 27401

Title	SVP, CONTROLLER
Name	SMITH, BRIAN J
Address	230 N ELM STREET
City-State-Zip:	GREENSBORO NC 27401

Title	CFO, EXECUTIVE VP
Name	COMPTON III, CHARLES E
Address	230 N ELM STREET
City-State-Zip:	GREENSBORO NC 27401

Title	SVP
Name	ALLEN, WILLIAM B
Address	230 N. ELM STREET
City-State-Zip:	GREENSBORO NC 27401

Title	VP, ASST. SECRETARY
Name	CAMERON, THERESA M
Address	230 N. ELM STREET
City-State-Zip:	GREENSBORO NC 27401

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: BRIAN J SMITH

SVP, CONTROLLER

03/18/2015

Electronic Signature of Signing Officer/Director Detail_____
Date