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FILED
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90241 036 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 814479

1. Corporation Name

WISCONSIN MORTGAGE ASSURANCE CORPORATION



DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

**270 E. KILBOURN AVE
P.O. BOX 488, TAX DEPT.
MILWAUKEE WI 53202
US**

**P.O. BOX 488, N/A
TAX DEPARTMENT
MILWAUKEE WI 53201
US**

3. Date Incorporated or Qualified

06/27/1960

2. Principal Place of Business

2a. Mailing Address

21
Suite, Apt. #, etc.

26
Suite, Apt. #, etc.

4. FEI Number

39-0916088

Applied For

Not Applicable

22
City & State

27
City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23
Zip Country

28
Zip Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24

25

29

30

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	R	☒ DELETE
NAME	MCGINNIS, JAMES A(RECEIV	
STREET ADDRESS	270 E. KILBOURN AVE	
CITY-ST-ZIP	MILWAUKEE WI	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PCEO D	☐ Change ☒ Addition
1.2 NAME	William H. Lacy	
1.3 STREET ADDRESS	270 E. Kilbourn Ave.	
1.4 CITY-ST-ZIP	Milwaukee, WI 53202	
2.1 TITLE	EVP CFO	☐ Change ☒ Addition
2.2 NAME	J. Michael Lauer	
2.3 STREET ADDRESS	270 E. Kilbourn Ave.	
2.4 CITY-ST-ZIP	Milwaukee, WI 53202	
3.1 TITLE	SV GCS D	☐ Change ☒ Addition
3.2 NAME	Jeffrey H. Lane	
3.3 STREET ADDRESS	270 E. Kilbourn Ave.	
3.4 CITY-ST-ZIP	Milwaukee, WI 53202	
4.1 TITLE	VT	☐ Change ☒ Addition
4.2 NAME	James A. Karpowicz	
4.3 STREET ADDRESS	270 E. Kilbourn Ave.	
4.4 CITY-ST-ZIP	Milwaukee, WI 53202	
5.1 TITLE	VCAO	☐ Change ☒ Addition
5.2 NAME	Patrick Sinks	
5.3 STREET ADDRESS	270 E. Kilbourn Ave.	
5.4 CITY-ST-ZIP	Milwaukee, WI 53202	
6.1 TITLE	VGCD	☐ Change ☒ Addition
6.2 NAME	Joseph J. Ziino, Jr.	
6.3 STREET ADDRESS	270 E. Kilbourn Ave.	
6.4 CITY-ST-ZIP	Milwaukee, WI 53202	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Patrick Sinks 4-22-99 (414) 347-6706

CR2E034 (11/98)

537868-9024136
814479

Officers



Wisconsin Mortgage Assurance Corporation

THESE OFFICERS WERE ELECTED EFFECTIVE DECEMBER 31, 1998

William H. Lacy	President and Chief Executive Officer
Curt S. Culver	Executive Vice President
J. Michael Lauer	Executive Vice President and Chief Financial Officer
Lawrence J. Pierzchalski	Executive Vice President - Risk Management
Jeffrey H. Lane	Senior Vice President, General Counsel and Secretary
Thomas A. Drew	Vice President - Claims
James A. Karpowicz	Vice President and Treasurer
Joseph J. Komanecki	Vice President - Tax
James A. McGinnis	Vice President and Assistant Treasurer
Patrick Sinks	Vice President, Controller and Chief Accounting Officer
Terrance R. Wright	Vice President - Regulatory Relations
Joseph J. Zilno, Jr.	Vice President, Associate General Counsel and Assistant Secretary

[Handwritten signature]

537868-90211-36
814479

Board of Directors



Wisconsin Mortgage Assurance Corporation

THESE DIRECTORS WERE ELECTED EFFECTIVE DECEMBER 31, 1998.

Curt S. Culver
William H. Lacy
Jeffrey H. Lane
J. Michael Lauer
James A. McGinnis
Lou T. Zellner
Joseph J. Zilno, Jr.

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