2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#819534

FILED Feb 15, 2011 Secretary of State

Entity Name: UNITED GUARANTY RESIDENTIAL INSURANCE COMPANY OF NORTH CAROLINA

Current Principal Place of Business: New Principal Place of Business:

230 N. ELM ST.

GREENSBORO, NC 274200327

Current Mailing Address: New Mailing Address:

230 N. ELM ST.

GREENSBORO, NC 274200327

FEI Number: 56-0789396 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHIEF FINANCIAL OFFICER PO BOX 6200 (32314-6200) 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

OFFICERS AND DIRECTORS:

Title: AS

Name: RIDENOUR, WILLIAM E Address: 230 N. ELM ST. City-St-Zip: GREENSBORO, NC 27401

City-3t-2tp. GIVEENSBOILO, NC 2140

Title: SVPC

Name: ALLEN, WILLIAM B Address: 230 N. ELM ST.

City-St-Zip: GREENSBORO, NC 27401

Title: SVP

Name: WALKER, DANIEL T Address: 230 N. ELM ST.

City-St-Zip: GREENSBORO, NC 27401

Title: 7

 Name:
 WADDELL III, HAL G

 Address:
 230 NORTH ELM ST

 City-St-Zip:
 GREENSBORO, NC 27401

Title:

 Name:
 AVERY, MARGARET D

 Address:
 230 NORTH ELM ST

 City-St-Zip:
 GREENSBORO, NC 27401

Title: \

 Name:
 SMITH, BRIAN J

 Address:
 230 N ELM STREET

 City-St-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 VP 02/15/2011