

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 824671

FILED
Feb 20, 2012
Secretary of State

Entity Name: UNITED GUARANTY RESIDENTIAL INSURANCE COMPANY

Current Principal Place of Business:

230 NORTH ELM STREET
GREENSBORO, NC 274012436

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 20597
GREENSBORO, NC 27401 US

New Mailing Address:

FEI Number: 42-0885398

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, LYNETTE
C/O CORPORATION SERVICE COMPANY
1201 HAYS STREET, SUITE 105
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: PD
Name: MARTINEZ, RONALD E
Address: 230 N. ELM ST.
City-St-Zip: GREENSBORO, NC 27401

Title: V
Name: BEISSINGER, GLORIA A
Address: 230 N. ELM ST
City-St-Zip: GREENSBORO, NC 27401 US

Title: VP
Name: SMITH, BRIAN J
Address: 230 N. ELM ST.
City-St-Zip: GREENSBORO, NC 27401 US

Title: S
Name: MARGARET, AVERY D
Address: 230 N. ELM ST.
City-St-Zip: GREENSBORO, NC 27401 US

Title: V
Name: MEDEIROS, SHERYL C
Address: 230 N. ELM ST.
City-St-Zip: GREENSBORO, NC 27401 US

Title: SVP
Name: ALLEN, WILLIAM B
Address: 230 NORTH ELM ST
City-St-Zip: GREENSBORO, NC 27401 US

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

02/20/2012

Electronic Signature of Signing Officer or Director

Date