2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2001 8:00 am
Secretary of State
02-03-2001 90059 023 ***150.00

DOCUMENT # 839735

1. Entity Name
AMERIN GUARANTY CORPORATION

710028

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
1601 MARKET STREET PHILADELPHIA PA 19103 US	1601 MARKET STREET PHILADELPHIA PA 19103 US

2. Principal Place of Business	3. Mailing Address
Same as above	Same as above.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-1922977 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

DEPARTMENT OF INSURANCE
SERVICE PROCESSING
200 E GAINES STREET
TALLAHASSEE FL 32399-4201

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CD FRIEDMAN, GERALD L 200 E RANDOLPH DR 49TH FLOOR CHICAGO IL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Roy J. Kasmar 18 Harrison Lane Newtown Square, PA 19073	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GOLDBERG, ALAN E. 1251 AVE OF THE AMERICAS NEW YORK NY 10020	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFO, Exec. VP C. Robert Quint 15 Pikes Way Cheltenham, PA 19012	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOFFEN, HOWARD I. 1251 AVE OF THE AMERICAS NEW YORK NY 10020	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary, General Counsel, Sr VP Howard S. Yaruss 80 Central Park West New York, NY 10023	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KASMAR, ROY J 200 E. RANDOLPH DR -49TH FLR CHICAGO IL 60601-7125	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Robert Radicioni 3033 Arrowhead Lane Plymouth Mtg. PA 19462	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD VICKERS, D I 200 EAST RANDOLPH DR., 49TH FLOOR CHICAGO IL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Terry Latimer 909 Pineview Drive West Chester, PA 19380	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RANDOLPH C. SAILER , II 200 EAST RANDOLPH DR., 49TH FLOOR CHICAGO IL	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/00)

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ Robert Radicioni 1/17/01 215-564-6600
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #