

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-28-2003 91498 029 ***150.00

DOCUMENT # P21065

1. Entity Name
MGIC MORTGAGE MARKETING CORPORATION



Principal Place of Business
270 E KILBOURN AVENUE
MILWAUKEE WI 53202
US

Mailing Address
P.O. BOX 488
~~TAX DEPARTMENT~~
MILWAUKEE WI 53201
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.
Legal Dept.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number 39-1495967

Applied For
Not Applicable

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

☒ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	EVP LAUER, JON MICHAEL 270 E KILBOURN AVENUE MILWAUKEE WI	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS ZIINO, JOSEPH J., JR. 270 E KILBOURN AVENUE MILWAUKEE WI	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CULVER, CURT S 270 E KILBOURN AVENUE MILWAUKEE WI 53202	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD LANE, JEFFREY H 270 E. KILBOURN AVE. MILWAUKEE WI	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVCO SINKS, PATRICK 270 E KILBOURN AVENUE MILWAUKEE WI 53202	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPT KARPOWICZ, JAMES A 270 E KILBOURN AVENUE MILWAUKEE WI 53202	<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASST. SECT.	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SECT.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Jeffrey H. Lane,
Secretary

4/21/03

800/558-9900

CR2E034 (10/02)

Attachment
DOC# P21065

90108871

MGIC MORTGAGE MARKETING CORPORATION / Document # P21065

ADDITIONAL OFFICERS LIST

ADDITIONAL OFFICERS NOT LISTED IN BLOCK 10.

Joseph J. Komaneki	Senior Vice President, Controller and Chief Accounting Officer
Steven T. Snodgrass	Senior Vice President
Dan D. Stilwell	Vice President and Assistant Secretary
Charlyn M. Peterson	Assistant Vice President and Assistant Secretary
Heidi A. Heyrman	Assistant Secretary
Lisa M. Pendergast	Assistant Treasurer

The address of all officers is: 270 E. Kilbourn Avenue
Milwaukee, WI 53202