

2005 FOR PROFIT CORPORATION ANNUAL REPORT


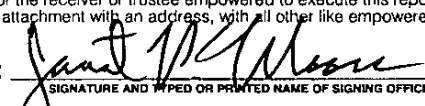
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Apr 21, 2005 8:00 am
Secretary of State

04-21-2005 90236 033 ***150.00

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04072005 Chg-P CR2E034 (10/03)

DOCUMENT # P35280			
1. Entity Name RADIAN ASSET ASSURANCE INC.			
Principal Place of Business 335 MADISON AVE. 25TH FLOOR NEW YORK, NY 10017-4605		Mailing Address 335 MADISON AVE. 25TH FLOOR NEW YORK, NY 10017-4605	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 22-2712977		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CHIEF FINANCIAL OFFICER P O BOX 6200 (32314-6200) 200 E. GAINES ST TALLAHASSEE, FL 32399-0000		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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BEIDLER, DAVID J 335 MADISON AVENUE - 25TH FLOOR NEW YORK, NY 100174605 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Beidler, David J. 335 Madison Ave - 25th Fl. New York, NY 10017 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V MOORE, JANET P 335 MADISON AVENUE - 25TH FLOOR NEW YORK, NY 100174605 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD Cooke, Stephen D. 335 Madison Ave. - 25th Fl. New York, NY 10017 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DELUCA, JOHN C 335 MADISON AVENUE - 25TH FLOOR NEW YORK, NY 100174605 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	See Attached List <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DERMAN, BRET S 335 MADISON AVENUE - 25TH FLOOR NEW YORK, NY 100174605 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DORLAND, BONITA Z 335 MADISON AVENUE - 25TH FLOOR NEW YORK, NY 100174605 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CAMPBELL, SALLY 335 MADISON AVENUE NEW YORK, NY 10017 <input type="checkbox"/> Delete	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: 		#18/05 212-984-9283	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

ATTACHMENT

Radian Asset Assurance Inc.
OFFICERS AND DIRECTORS
AS OF APRIL 7, 2005

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2005 FLORIDA UNIFORM BUSINESS REPORT

V/D

Beidler, David J.
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V/D

DeLuca, John C.
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V/D

Derman, Bret S.
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

CEO/D

Filipps, Frank P.
Radian Group Inc.
1601 Market Street
Philadelphia, PA 19103-2337

V

Laudon, Anna
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V

Moore, Janet P.
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V

Radicioni, Robert
Radian Group Inc.
1601 Market Street
Philadelphia, PA 19103-2337

V/D

Rossi, Patrick Jr.
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V/D

Salton, Jeffrey C.
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V/D

Campbell, Sally
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V/S/D

Cooke, Stephen, D
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V/D

Dorland, Bonita Z.
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

P/D

Kamarck, Martin A.
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V

Latimer, Terry
Radian Group Inc.
1601 Market Street
Philadelphia, PA 19103-2337

V

Mark Mylon
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V/D

Russell, William M.
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605

V/D

Yaruss, Howard
Radian Group Inc.
1601 Market Street
Philadelphia, PA 19103-2337

V

Wu, Hao
Radian Asset Assurance Inc.
335 Madison Avenue - 25th Floor
New York, NY 10017-4605