2003 FOR PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

Apr 15, 2003 8:00 am Secretary of State P35280 DOCUMENT # 04-15-2003 90085 015 ***150.00 1. Entity Name RADIAN ASSET ASSURANCE INC. Principal Place of Business Mailing Address 335 MADISON AVE. 335 MADISON AVE. 25TH FLOOR 25TH FLOOR NEW YORK NY 10017-4605 NEW YORK NY 10017-4605 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State Applied For 22-2712977 Not Applicable αiΣ Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent INSURANCE COMMISSIONER Street Address (P.O. Box Number is Not Acceptable) THE CAPITOL BLDG. TALLAHASSEE FL 32399-0300 City 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. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. ☐ Addition TITLE. VSD ☐ Defete TITLE Please see attached list. NAME BEIDLER, DAVID J NAME STREET ADDRESS STREET ADDRESS 335 MADISON AVENUE - 25TH FLOOR CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10017-4605 TITLE ☐ Delete TITLE Change ☐ Addition VD NAME NAME BOWERS, EDWARD M STREET ADDRESS 335 MADISON AVENUE - 25TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10017-4605 ☐ Delete TITLE ☐ Change TITLE ☐ Addition VD NAME NAME DELUCA, JOHN C STREET ADDRESS STREET ADDRESS 335 MADISON AVENUE - 25TH FLOOR CITY-ST-7/P CITY-ST_ZIP_ NEW YORK NY 10017-4605 ---TITLE Change ☐ Addition TITLE Delete NAME NAME DERMAN, BRET S STREET ADDRESS 335 MADISON AVENUE - 25TH FLOOR STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10017-4605 TITLE Delete Change ☐ Addition TITLE NAME NAME LAMVERT, CONSTANCE A STREET ADDRESS STREET ADDRESS 335 MADISON AVENUE - 25TH FLOOR CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY 10017-4605 ☐ Delete TITLE TITLE Change Addition ۷D NAME NAME CAMPBELL, SALLY

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

335 MADISON AVENUE - 25TH FLOOR

NEW YORK NY 10017-4605

STREET ADDRESS

CITY-ST-7IP

FILED

RADIAN ASSET ASSURANCE INC. OFFICERS AND DIRECTORS

AS OF APRIL 8, 2003 2003 FLORIDA UNIFORM BUSINESS REPORT

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