2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 814479

Entity Name: MGIC INDEMNITY CORPORATION

Current Principal Place of Business:

250 E KILBOURN AVE REGULATORY RELATIONS DEPT MILWAUKEE, WI 53202

Current Mailing Address:

P.O. BOX 756

MILWAUKEE, WI 53201 US

FEI Number: 39-0916088 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

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

FILED Apr 10, 2019

Secretary of State

2274353067CC

Officer/Director Detail:

Title PCOO, D Title EVP, CFO, D

Name SINKS, PATRICK Name MATTKE, TIMOTHY J.

Address 250 E KILBOURN AVE Address 250 E KILBOURN AVE

REGULATORY RELATIONS DEPT

VΡ

VΡ

City-State-Zip: MILWAUKEE WI 53202 MILWAUKEE WI 53202 City-State-Zip:

Title **VPASD**

Name HEYRMAN, HEIDI A. Name CHI, GREGORY A

Address 250 E KILBOURN AVE Address 250 E KILBOURN AVE

REGULATORY RELATIONS DEPT REGULATORY RELATIONS DEPT

Title

City-State-Zip: MILWAUKEE WI 53202 MILWAUKEE WI 53202 City-State-Zip:

VΡ

Title VP, T, D ZIMMERMAN, MICHAEL J Name

Name PENDERGAST, LISA M. 250 E KILBOURN AVE Address

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MILWAUKEE WI 53202 City-State-Zip:

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VΡ Title

Title

Name DARDZINSKI, DEAN A. DEMPSEY, STEPHEN M. Name

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REGULATORY RELATIONS DEPT MILWAUKEE WI 53202

Title

City-State-Zip: MILWAUKEE WI 53202 City-State-Zip:

Continues on page 2

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.

04/10/2019 SIGNATURE: JENNIFER L. METRIE **AVP - REGULATORY** RELATIONS

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP

Name DUNST, SANDRA K.

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Title VP

Name ELKINS, MARY L.

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Title VF

Name HUGHES, JAMES J.

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Title VP

Name KRAUTER, MARK J.

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Title VP

Name MIOSI, SALVATORE A.

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Title VP

Name NIELSEN, JEFFREY N.

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Title VP

Name SCHROEDER, JOHN R.

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Title VPAS

Name SPIROFF, PAUL A.

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Title VP

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Title VP

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Title VP

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Title VP

Name PITTMAN, WILLIAM

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Title VP, CONTROLLER, CAO, DIRECTOR

Name SPERBER, JULIE K.

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Title VP

Name THOMAS, KURT J.

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Title VP, ASST GEN COUNSEL, ASST.

SECRETARY

Name TSUCHIHASHI, MARTHA F.

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Title VP

Name VOS, CARIE L.

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WORMMEESTER, JERRY L Name

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AVP Title

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MITCHELL, EYLSE M Name

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COOPER, GEOFFREY F. Name

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SPECHT, BRIAN D Name

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Address

DESELMS, HANS F Name 250 E KILBOURN AVE

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PERRY, CHRISTOPHER T Name

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Title **OTHER**

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Title VΡ

ARMBRUST, KURT J. Name

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Title VP, DIRECTOR

Name MACKEY, STEPHEN C.

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Title

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SEMENAK, PETER A. Name Address

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Name AIKIN, TERRY A

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Name HIGGINS, DIANNA

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Name SCHROEDER, DAVID H

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Title EVP, GEN. COUNSEL, SECRETARY,

DIRECTOR

Name METRIE, JENNIFER L

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Title VP

Name MURPHY, STACEY B

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Name MAGGIO, PAULA C

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