

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 819282

FILED
Jan 27, 2020
Secretary of State
3070105376CC

Entity Name: GENWORTH MORTGAGE INSURANCE CORPORATION OF NORTH CAROLINA

Current Principal Place of Business:

8325 SIX FORKS ROAD
RALEIGH, NC 27615-6519

Current Mailing Address:

8325 SIX FORKS ROAD
RALEIGH, NC 27615-6519

FEI Number: 56-0729821

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER
200 E. GAINES ST
TALLAHASSEE, FL 32399-0000 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

Officer/Director Detail :

Title PD
Name GUPTA, ROHIT
Address 8325 SIX FORKS RD
City-State-Zip: RALEIGH NC 27615

Title V
Name GREEN, JEANNIE B
Address 8325 SIX FORKS ROAD
City-State-Zip: RALEIGH NC 27615

Title VT
Name MITCHELL, HARDIN D
Address 8325 SIX FORKS ROAD
City-State-Zip: RALEIGH NC 27615

Title VS
Name STOLOVE, EVAN
Address 8325 SIX FORKS ROAD
City-State-Zip: RALEIGH NC 27615

Title DIRECTOR
Name SCHNEIDER, KEVIN
Address 8325 SIX FORKS ROAD
City-State-Zip: RALEIGH NC 27615

Title ASST. SECRETARY
Name WILBOURNE, ELIZABETH
Address 8325 SIX FORKS ROAD
City-State-Zip: RALEIGH NC 27615-6519

Title DIRECTOR
Name DERSTINE, MICHAEL
Address 8325 SIX FORKS ROAD
City-State-Zip: RALEIGH NC 27615-6519

Title DIRECTOR
Name GUARINO, ANTHONY
Address 8325 SIX FORKS ROAD
City-State-Zip: RALEIGH NC 27615-6519

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.

SIGNATURE: ELIZABETH WILBOURNE

ASST. SECRETARY

01/27/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name MCMAHON, KEVIN

Address 8325 SIX FORKS ROAD

City-State-Zip: RALEIGH NC 27615-6519