

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 837194

**Entity Name:** MBIA INSURANCE CORPORATION**Current Principal Place of Business:**1 MANHATTANVILLE ROAD  
SUITE 301  
PURCHASE, NY 10577**Current Mailing Address:**1 MANHATTANVILLE ROAD  
SUITE 301  
PURCHASE, NY 10577 US**FEI Number:** 43-0899449**Certificate of Status Desired:** Yes**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** MANAGING DIRECTOR, GENERAL  
COUNSEL, SECRETARY AND  
DIRECTOR**Name** HARRIS, JONATHAN C.**Address** 1 MANHATTANVILLE ROAD  
SUITE 301**City-State-Zip:** PURCHASE NY 10577**Title** TREASURER, AVP, CHIEF  
INVESTMENT OFFICER & DIRECTOR**Name** NORTH, OLIVER E.W.**Address** 1 MANHATTANVILLE ROAD  
SUITE 301**City-State-Zip:** PURCHASE NY 10577**Title** PRESIDENT, MANAGING DIRECTOR,  
CHIEF RISK OFFICER AND DIRECTOR**Name** AVITABILE, DANIEL M.**Address** 1 MANHATTANVILLE ROAD  
SUITE 301**City-State-Zip:** PURCHASE NY 10577**Title** DIRECTOR**Name** CALANDRA, KRISTIN M.**Address** 1 MANHATTANVILLE ROAD  
SUITE 301**City-State-Zip:** PURCHASE NY 10577**Title** PRESIDENT, CRO AND DIRECTOR**Name** AVITABILE, DANIEL MICHAEL**Address** 1 MANHATTANVILLE ROAD  
SUITE 301**City-State-Zip:** PURCHASE NY 10577**Title** CHAIRMAN, CHIEF FINANCIAL  
OFFICER AND DIRECTOR**Name** MCKIERNAN, ANTHONY**Address** 1 MANHATTANVILLE ROAD  
SUITE 301**City-State-Zip:** PURCHASE NY 10577**Title** DIRECTOR**Name** SAUNDERS, GARY**Address** 1 MANHATTANVILLE ROAD  
SUITE 301**City-State-Zip:** PURCHASE NY 10577**Title** DIRECTOR**Name** DIAMOND, GREGORY R.**Address** 1 MANHATTANVILLE ROAD  
SUITE 301**City-State-Zip:** PURCHASE NY 10577

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:** DANIEL M. AVITABILEPRESIDENT, CRO AND  
DIRECTOR

01/17/2018

Electronic Signature of Signing Officer/Director Detail

Date

