

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 839735

FILED
Apr 24, 2009
Secretary of State

Entity Name: AMERIN GUARANTY CORPORATION

Current Principal Place of Business:

1601 MARKET STREET
PHILADELPHIA, PA 19103 US

New Principal Place of Business:

Current Mailing Address:

1601 MARKET STREET
PHILADELPHIA, PA 19103 US

New Mailing Address:

FEI Number: 23-1922977 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KARLEN, SUSAN
1419 HOLLEMAN DRIVE
VALRICO, FL 33594 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: APPLGATE, DAVID
Address: 1046 N KIMBLES ROAD
City-St-Zip: YARDLEY, PA 19067

Title: CFOE () Delete
Name: QUINT, C. ROBERT
Address: 15 PIKES WAY
City-St-Zip: CHELTENHAM, PA 19012

Title: S () Delete
Name: HUNTER, TIMOTHY
Address: 1009 ANNIN ST
City-St-Zip: PHILADELPHIA, PA 19147

Title: T () Delete
Name: LATIMER, TERRY
Address: 909 PINEVIEW DRIVE
City-St-Zip: WEST CHESTER, PA 19380

Title: V () Delete
Name: RADICIONI, ROBERT
Address: 3033 ARROW HEAD LANE
City-St-Zip: PLYMOUTH MTS, PA 19462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRYCE, TERESA
Address: 731 S. HICKS STREET
City-St-Zip: PHILADELPHIA, PA 19146

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ROBERT RADICIONI

V

04/24/2009

Electronic Signature of Signing Officer or Director

_____ Date