

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 839735

**FILED**  
**Apr 02, 2019**  
**Secretary of State**  
**2511414873CC**

**Entity Name:** RADIAN MORTGAGE ASSURANCE INC.

**Current Principal Place of Business:**

1500 MARKET STREET  
WEST TOWER, SUITE 2050  
PHILADELPHIA, PA 19102

**Current Mailing Address:**

1500 MARKET STREET  
SUITE 2050W  
PHILADELPHIA, PA 19102 US

**FEI Number:** 23-1922977

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CHIEF FINANCIAL OFFICER  
200 E. GAINES ST.  
TALLAHASSEE, FL 32399 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           DIRECTOR  
Name           MCMAHON, BRIEN  
Address        1500 MARKET STREET  
                  WEST TOWER, SUITE 2050  
City-State-Zip: PHILADELPHIA PA 19102

Title           DIRECTOR  
Name           BRUMMER, DEREK  
Address        1500 MARKET STREET  
                  WEST TOWER, SUITE 2050  
City-State-Zip: PHILADELPHIA PA 19102

Title           DIRECTOR  
Name           HOFFMAN, EDWARD J.  
Address        1601 MARKET STREET  
                  11TH FLOOR  
City-State-Zip: PHILADELPHIA PA 19103

Title           EXECUTIVE VICE PRESIDENT, CHIEF  
                  FINANCIAL OFFICER  
Name           HALL, J. FRANKLIN  
Address        1500 MARKET STREET  
                  WEST TOWER, SUITE 2050  
City-State-Zip: PHILADELPHIA PA 19102

Title           SENIOR VICE PRESIDENT  
Name           RADICIONI, ROBERT V.  
Address        1500 MARKET STREET  
                  WEST TOWER, SUITE 2050  
City-State-Zip: PHILADELPHIA PA 19102

Title           SECRETARY  
Name           WHITE HUNTER, TIMOTHY  
Address        1500 MARKET STREET  
                  WEST TOWER, SUITE 2050  
City-State-Zip: PHILADELPHIA PA 19102

*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:** ROBERT V. RADICIONI

**SENIOR VICE PRESIDENT 04/02/2019**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date