# 555 THEODORE FREMD AVENUE

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

Entity Name: ACA FINANCIAL GUARANTY CORPORATION

SUITE B-302 RYE, NY 10580

DOCUMENT# P15430

# **Current Mailing Address:**

555 THEODORE FREMD AVENUE SUITE B-302 RYE, NY 10580 US

**Current Principal Place of Business:** 

# FEI Number: 52-1474358

## Name and Address of Current Registered Agent:

CHIEF FINANCIAL OFFICER 200 E. GAINES STREET 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

### **Officer/Director Detail :**

| Title           | CFO                                      | Title           | PRESIDENT                             |
|-----------------|--|-----------------|---------------------------------------|
| Name            | LEONARD, SEAN                            | Name            | BERKOWITZ, STEVEN J                   |
| Address         | 555 THEODORE FREMD AVE.<br>SUITE B-302   | Address         | 555 THEODORE FREMD AVE<br>SUITE B-302 |
| City-State-Zip: | NEW YORK NY 10580                        | City-State-Zip: | NEW YORK NY 10580                     |
| Title           | SECRETARY                                |                 |                                       |
| Name            | MALONE, BRENDAN                          |                 |                                       |
| Address         | 555 THEODORE FREMD AVENUE<br>SUITE B-302 |                 |                                       |
| City-State-Zip: | RYE NY 10580                             |                 |                                       |

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.

SECRETARY

## SIGNATURE: BRENDAN MALONE

Electronic Signature of Signing Officer/Director Detail

Certificate of Status Desired: No

Date

01/23/2023 Date