

1.) CORPORATION NAME:

**Ambac Assurance Corporation**

DUE DATE: **7/31/2011**

SCC ID NO: **F0241366**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

**AUTH IN VI**

**CT CORPORATION SYSTEM**

**4701 COX RD STE 301**

**GLEN ALLEN, VA 23060-6802**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	40,000,000
SEP	285,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**WI**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: ONE STATE ST PLAZA

CITY/ST/ZIP: NEW YORK, NY 10004-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: DAVID TRICK  
TITLE: SR MD/CFO/T  
ADDRESS: ONE STATE STREET PLAZA  
CITY/ST/ZIP/CO: NY, NY 10004-

OFFICER

DIRECTOR

NAME: MICHAEL A CALLEN  
TITLE: DIRECTOR  
ADDRESS: 1 STATE STREET PLAZA  
CITY/ST/ZIP/CO: NEW YORK, NY 10004-

OFFICER

DIRECTOR

NAME: STEPHEN M. KSENAK  
TITLE: M.D., Genl Cosl  
ADDRESS: 1 STATE STREET  
CITY/ST/ZIP/CO: NEW YORK, NY 10004-

OFFICER

DIRECTOR

NAME: DIANA NEWMAN ADAMS  
TITLE: Pres/CEO  
ADDRESS: 1 STATE STREET  
CITY/ST/ZIP/CO: NEW YORK, NY 10004-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ STEPHEN M. KSENAK  
SIGNATURE OF DIRECTOR/OFFICER  
LISTED IN THIS REPORT

STEPHEN M. KSENAK, M.D., Genl  
Cosl  
PRINTED NAME AND CORPORATE  
TITLE

6/15/2011  
DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.