

SCC eFile

**2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

212543069

1.) CORPORATION NAME:

REPUBLIC MORTGAGE INSURANCE COMPANY

DUE DATE: **11/30/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**JOSEPH E. BLACKBURN, JR.
300 WEST MAIN STREET
RICHMOND, VA 23220**

SCC ID NO: **F0287005**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	500,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NC

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 101 NORTH CHERRY STREET

CITY/ST/ZIP: WINSTON-SALEM, NC 27101

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.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME:	CHRISTOPHER STEPHEN NARD	
TITLE:	CEO, Chairman	
ADDRESS:	600 HILL RD.	
CITY/ST/ZIP/CO:	WINNETKA, IL 60093	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JOHN EDEL GERKE	
TITLE:	VP and Treasure	
ADDRESS:	1331 KNEB WORTH LN.	
CITY/ST/ZIP/CO:	CATAWBA, NC 28609	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	JOEL H PASTERNAK	
TITLE:	VP and Secretar	
ADDRESS:	4109 CHERRYLAUREL LANE	
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27106	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	CRYSTAL E MARTIN	
TITLE:	ASST SECRETARY	
ADDRESS:	101 BROOKVALLEY ROAD	
CITY/ST/ZIP/CO:	KING, NC 27021	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DEANA MCINNIS VICKERS	
TITLE:	ASST SECRETARY	
ADDRESS:	135 CORBRIDGE LN.	
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27106	

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME:	DAVID CHRISTOPHER CASH	
TITLE:	VP and CFO	
ADDRESS:	4113 ALLISTAIR ROAD	
CITY/ST/ZIP/CO:	WINSTON-SALEM, NC 27014	

NAME: JIMMY ALLEN DEW TITLE: DIRECTOR ADDRESS: 407 RIVERBEND DR/ CITY/ST/ZIP/CO: ADVANCE, NC 27006	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: ALDO CHARLES ZUCARO TITLE: DIRECTOR ADDRESS: 126 NANTUCKET LN CITY/ST/ZIP/CO: BARRINGTON, IL 60001	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Kevin John Henry TITLE: PRESIDENT ADDRESS: 150 Ridge Gate Court CITY/ST/ZIP/CO: Lewisville, NC 27023	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Spencer LeRoy, III TITLE: DIRECTOR ADDRESS: 2089 Blackstone Avenue CITY/ST/ZIP/CO: LaGrange, IL 60525	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: Michael Paul Derstine TITLE: VICE PRESIDENT ADDRESS: 1818 Robinhood Road CITY/ST/ZIP/CO: Winston-Salem, NC 27104	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> 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/ JOEL H PASTERNAK SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	JOEL H PASTERNAK, VP and Secretar PRINTED NAME AND CORPORATE TITLE	11/7/2012 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.		