

SCC eFile  
(6/10)

2012 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION

212502276

1.) CORPORATION NAME:

**FINANCIAL GUARANTY INSURANCE COMPANY**

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

**AUTH IN VI**

**CORPORATION SERVICE COMPANY**

**Bank of America Center, 16th Floor**

**1111 East Main Street**

**RICHMOND, VA 23219**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NY**

DUE DATE: **2/29/2012**

SCC ID NO: **F0604894**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 125 PARK AVE

CITY/ST/ZIP: NEW YORK, NY 10017-

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: CAROLANNE GARDNER  
TITLE: VP & SEC  
ADDRESS: 125 PARK AVE  
CITY/ST/ZIP/CO: NEW YORK, NY 10017-

OFFICER

DIRECTOR

NAME: STEVEN P. NATKO  
TITLE: VP & ASSIST SEC  
ADDRESS: 125 PARK AVENUE  
CITY/ST/ZIP/CO: NEW YORK, NY 10017-

OFFICER

DIRECTOR

NAME: NICK SANTORO  
TITLE: SR VP/CFO/AST T  
ADDRESS: 125 PARK AVE  
CITY/ST/ZIP/CO: NEW YORK, NY 10017-

OFFICER

DIRECTOR

NAME: A. EDWARD TURI, III  
TITLE: EXEC VP & GC  
ADDRESS: 125 PARK AVE  
CITY/ST/ZIP/CO: NEW YORK, NY 10017-

OFFICER

DIRECTOR

NAME: ROBERT L. FRIEDMAN  
TITLE: DIRECTOR  
ADDRESS: 125 PARK AVENUE  
CITY/ST/ZIP/CO: NEW YORK, NY 10017-

OFFICER

DIRECTOR

NAME: DANIEL G. HELLE TITLE: DIRECTOR ADDRESS: 125 PARK AVENUE CITY/ST/ZIP/CO: NEW YORK, NY 10017-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: ROBERT B. HOLLAND TITLE: DIRECTOR ADDRESS: 125 PARK AVENUE CITY/ST/ZIP/CO: NEW YORK, NY 10017-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JEFFREY P. HUGHES TITLE: DIRECTOR ADDRESS: 125 PARK AVENUE CITY/ST/ZIP/CO: NEW YORK, NY 10017-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: JOHN S. DUBEL TITLE: CEO/VICE CHAIR ADDRESS: 125 PARK AVE CITY/ST/ZIP/CO: NEW YORK, NY 10017-	<input checked="" type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: THOMAS C. WAJNERT TITLE: CHAIRMAN ADDRESS: 125 PARK AVENUE CITY/ST/ZIP/CO: NEW YORK, NY 10017-	<input type="checkbox"/> OFFICER <input checked="" 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/ STEVEN P. NATKO _____ SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	STEVEN P. NATKO, VP & ASSIST SEC _____ PRINTED NAME AND CORPORATE TITLE
1/13/2012 _____ 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.	