

1.) CORPORATION NAME:

MGIC Credit Assurance Corporation

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

AUTH IN VI

NATIONAL REGISTERED AGENTS INC

4001 North Ninth Street, Suite 227

ARLINGTON, VA 22203

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

SCC ID NO: **F1459884**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	200,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ARLINGTON COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

WI

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 250 EAST KILBOURN AVE

CITY/ST/ZIP: MILWAUKEE, WI 53202-

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: PATRICK SINKS
TITLE: P/COO
ADDRESS: 250 E KILBOURN AVE
CITY/ST/ZIP/CO: MILWAUKEE, WI 53202-

OFFICER

DIRECTOR

NAME: HEIDI A. HEYRMAN
TITLE: VP, AST GC, SEC
ADDRESS: 250 EAST KILBOURN AVENUE
CITY/ST/ZIP/CO: MILWAUKEE, WI 53202-

OFFICER

DIRECTOR

NAME: JEFFREY H LANE
TITLE: SR VP/GC/AS
ADDRESS: 250 EAST KILBOURN AVE
CITY/ST/ZIP/CO: MILWAUKEE, WI 53202-

OFFICER

DIRECTOR

NAME: J MICHAEL LAUER
TITLE: EXEC VP/CFO
ADDRESS: 250 EAST KILBOURN AVE
CITY/ST/ZIP/CO: MILWAUKEE, WI 53202-

OFFICER

DIRECTOR

NAME: TIMOTHY JAMES MATTKE
TITLE: VP/CONT
ADDRESS: 250 EAST KILBOURN AVE
CITY/ST/ZIP/CO: MILWAUKEE, WI 53202-

OFFICER

DIRECTOR

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LAWRENCE J. PIERZCHALSKI		
TITLE: EXECUTIVE VP		
ADDRESS: 250 EAST KILBOURN AVENUE		
CITY/ST/ZIP/CO: MILWAUKEE, WI 53202-		

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: CURT S CULVER		
TITLE: CHAIRMAN/CEO		
ADDRESS: 250 EAST KILBOURN AVE		
CITY/ST/ZIP/CO: MILWAUKEE, WI 53202-		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: JAMES A. KARPOWICZ		
TITLE: SRVP & TREAS		
ADDRESS: 250 EAST KILBOURN AVE		
CITY/ST/ZIP/CO: MILWAUKEE, WI 53202-		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: CHERYL L. WEBB		
TITLE: VICE PRESIDENT		
ADDRESS: 250 EAST KILBOURN AVE		
CITY/ST/ZIP/CO: MILWAUKEE, WI 53202-		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: CARLA A. GALLAS		
TITLE: VICE PRESIDENT		
ADDRESS: 250 EAST KILBOURN AVE		
CITY/ST/ZIP/CO: MILWAUKEE, WI 53202-		

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/ HEIDI A. HEYRMAN	HEIDI A. HEYRMAN, VP, AST GC, SEC	12/27/2011
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	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.