

1.) CORPORATION NAME:

Essent Guaranty, Inc.

DUE DATE: **8/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA**

SCC ID NO: **F1799586**

5.) STOCK INFORMATION

| CLASS | AUTHORIZED |
|--------|------------|
| COMMON | 10,000 |

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

PA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: TWO RADNOR CORPORATE CENTER, 3RD FLOOR
100 MATSONFORD ROAD

CITY/ST/ZIP: RADNOR, PA 19807

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.

| | | |
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| | <input checked="" type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | MARK ANTHONY CASALE | |
| TITLE: | PRES/CEO | |
| ADDRESS: | TWO RADNOR CORPORATE CENTER, 3RD FLOOR 100 MATSONFORD ROAD RADNOR, PA 19087 | |
| CITY/ST/ZIP/CO: | RADNOR, PA 19087 | |

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| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | PETER SIMON | |
| TITLE: | TREASURER | |
| ADDRESS: | TWO RADNOR CORPORATE CENTER, 3RD FLOOR 100 MATSONFORD ROAD RADNOR, PA 19087 | |
| CITY/ST/ZIP/CO: | RADNOR, PA 19087 | |

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| | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| NAME: | MARY LOURDES GIBBONS | |
| TITLE: | SECRETARY | |
| ADDRESS: | TWO RADNOR CORPORATE CENTER, 3RD FLOOR 100 MATSONFORD ROAD RADNOR, PA 19087 | |
| CITY/ST/ZIP/CO: | RADNOR, PA 19087 | |

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| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | ROBERT GLANVILLE | |
| TITLE: | DIRECTOR | |
| ADDRESS: | ONE GRAND CENTRAL PL 60 E 42ND ST, 50TH FL NEW YORK, NY 10165 | |
| CITY/ST/ZIP/CO: | NEW YORK, NY 10165 | |

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| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | RAJIV KAMILLA | |
| TITLE: | DIRECTOR | |
| ADDRESS: | 200 WEST STREET NEW YORK, NY 10282 | |
| CITY/ST/ZIP/CO: | NEW YORK, NY 10282 | |

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| | <input type="checkbox"/> OFFICER | <input checked="" type="checkbox"/> DIRECTOR |
| NAME: | ANDREW PETER TRIGG | |
| TITLE: | DIRECTOR | |
| ADDRESS: | 452 FIFTH AVENUE NEW YORK, NY 10018 | |
| CITY/ST/ZIP/CO: | NEW YORK, NY 10018 | |

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|-----------------|--|---|-----------------------------------|
| NAME: | Lawrence McAlee | <input checked="" type="checkbox"/> OFFICER | <input type="checkbox"/> DIRECTOR |
| TITLE: | SVP/CFO | | |
| ADDRESS: | Two Radnor Corporate Center, 3rd Floor | | |
| | 100 Matsonford Road | | |
| CITY/ST/ZIP/CO: | Radnor, PA 19087 | | |

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/ Lawrence McAlee | Lawrence McAlee, SVP/CFO | 7/9/2013 |
| 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.