	State of Rhode	Island	Fee: \$50.00			
	Office of the Secreta					
	Division Of Busines	s Services				
	148 W. River Street					
1426	Providence RI 029					
1030	(401) 222-30	40				
Foreign Business Corpora Annual Report	tion					
Filing Period: February 1 - May	1					
In accordance with R.I.G.L. 7-1						
file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.						
ANNUAL REPORT YEAR - ENT	ER THE CURRENT YEAR 2	024 : <u>2024</u>				
1. Corporate ID No. 00084	9384					
2. Name of Corporation United	ed Guaranty Services, Inc.					
3. Street Address Principal B	usiness Office:					
No. and Street: 230 N EI	LM STREET					
City or Town: GREENS		<u>NC</u> Zip: <u>27401</u>	Country: <u>USA</u>			
4. Business Phone No.						
8003627137						
5. State of Incorporation						
State: <u>NC</u>						
NAICS CODE						
Enter the six digit NAICS Code Download the list of codes <u>her</u>	•	•	· · ·			
<u>812990</u>						
6. Brief Description of the Character of Business Conducted in Rhode Island						
I HIKD PARTY SERVICE P	THIRD PARTY SERVICE PROVIDER FOR MORTGAGES					
7. Names and Addresses of the	7. Names and Addresses of the Officers and Directors:					
All officers and directors must be listed.						
Title	Individual Name	Add				
	First, Middle, Last, Suffix	Address, City or Town, S	biate, ZIP Code, Country			

TREASURER	THABISO ZWANE	230 N ELM STREET GREENSBORO, NC 27401 USA
SECRETARY	TRACY T WILLIS	230 N ELM STREET GREENSBORO, NC 27401 UNI
DIRECTOR	R. MICHAEL SCHMEISER	230 N. ELM STREET GREENSBORO, NC 27401 USA
DIRECTOR	T. MICHAEL HITT	230 N. ELM STREET GREENSBORO, NC 27401 USA
CHIEF FINANCIAL OFFICER	THOMAS H JETER	230 N. ELM STREET GREENSBORO, NC 27401 USA
SVP- INSURANCE OPERATIONS	T. MICHAEL HITT	230 N. ELM STREET GREENSBORO, NC 27401 USA
CHIEF RISK OFFICER	CHERYL A FELTGEN	230 N. ELM STREET GREENSBORO, NC 27401 USA
PRESIDENT	R. MICHAEL SCHMEISER	230 N. ELM STREET GREENSBORO, NC 27401 USA

8. Shares Authorized and Issued

Class of Stock	Series of Stock	Par Value Per		Total Issued and
		Share	Total Authorized	Outstanding
			Shares	Num of
			Number of Shares	Shares
CWP		\$1.0000	1,000,000.00	10000

9. This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

Signed this 18 Day of March, 2024 at 12:05:17 PM. *This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the corporation, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-1.2.*

By DEBORAH CUSACK

Signature of Authorized Representative of the Corporation

Form No. 630 Revised 09/07