2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F03000003439

Entity Name: EQUITABLE TRUST MORTGAGE CORPORATION

FILED Dec 03, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5022-D CAMPBELL BLVD. 5022 CAMPBELL BLVD. BALTIMORE, MD 21236

SUITE D

NOTTINGHAM, MD 21236

Current Mailing Address: New Mailing Address:

5022 CAMPBELL BLVD 5022-D CAMPBELL BLVD.

BALTIMORE, MD 21236 SUITE D

NOTTINGHAM, MD 21236

FEI Number: 52-2225567 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FIGUEROA, JORGE CAPEZIO, WILLIAM J 9402 VENEŽIA PLANTATIN DRIVE 130 CAMILLE CT

OLDSMAR, FL 34677 US ORLANDO, FL 32829

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: WILLIAM CAPEZIO 12/03/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: PRFS (X) Change () Addition

SAPP, RICHARD H SAPP, RICHARD H Name: Name: 3014 SUFFOLK LANE 3014 SUFFOLK LANE Address: Address: City-St-Zip: FALLSTON, MD 21047 City-St-Zip: FALLSTON, MD 21047

Title: SD Title: VΡ (X) Change () Addition () Delete Name: CAREY, DAVID A Name:

CAREY, DAVID A 11793 FREDERICK RD 11793 FREDERICK RD Address: Address: ELLICOTT CITY, MD 21042 ELLICOTT CITY, MD 21042 City-St-Zip: City-St-Zip:

() Delete Title: Title: TVC (X) Change () Addition

LUCAS, WILLIAM S Name: LUCAS, WILLIAM S Name: 1014 HART RD 1014 HART RD Address: Address: City-St-Zip: BALTIMORE, MD 21086 City-St-Zip: BALTIMORE, MD 21086

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

VΡ SIGNATURE: WILLIAM SCOTT LUCAS 12/03/2007