2004 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Dec 02, 2004
Secretary of State

DOCUMENT# F03000004517

Entity Name: MBIA MUNICIPAL INVESTORS SERVICE CORPORATION

Current Principal Place of Business:

113 KING ST.
ARMONK, NY 10504

New Principal Place of Business:

Current Mailing Address:

113 KING ST.
ARMONK, NY 10504

New Mailing Address:

FEI Number: 13-3594521 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

CT CORPORATION
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

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: JILL KRANZ 12/02/2004
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:

Title: CP ( ) Delete
Name: HELLER, FRANCIS
Address: 113 KING ST.
City-St-Zip: ARMONK, NY 10504

Title: VC ( ) Delete
Name: BROWN, W. THATCHER
Address: 2701 RENAISSANCE BLVD, FOURTH FLOOR
City-St-Zip: KING OF PRUSSIA, PA 19406

Title: D ( ) Delete
Name: DUNTON, GARY C
Address: 113 KING ST.
City-St-Zip: ARMONK, NY 10504

Title: DT ( ) Delete
Name: BUDNICK, NEIL G
Address: 113 KING ST.
City-St-Zip: ARMONK, NY 10504

Title: VP ( ) Delete
Name: GOODALE, ANDREW W
Address: 113 KING ST.
City-St-Zip: ARMONK, NY 10504

Title: S ( ) Delete
Name: CHUBINSKY, LEONARD I
Address: 113 KING ST.
City-St-Zip: ARMONK, NY 10504

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: CORSO, CLIFFORD D
Address: 113 KING ST.
City-St-Zip: ARMONK, NY 10504

Title: T (X) Change ( ) Addition
Name: BUDNICK, NEIL G
Address: 113 KING STREET
City-St-Zip: ARMONK, NY 10504

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: LEONARD I. CHUBINSKY S 12/02/2004
Electronic Signature of Signing Officer or Director Date