

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F06000002074

FILED
Oct 04, 2007
Secretary of State

Entity Name: GRANITE TITLE ASSOCIATES, INC.

Current Principal Place of Business:

2330 W. JOPPA ROAD
SUITE 107
LUTHERVILLE, MD 21093

New Principal Place of Business:

Current Mailing Address:

2330 W. JOPPA ROAD
SUITE 107
LUTHERVILLE, MD 21093

New Mailing Address:

FEI Number: 59-3812644 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

STIVERS, H.B.
245 EAST VIRGINIA STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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: H.B. STIVERS

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: P () Delete
Name: MURDOCH, MIRANDA
Address: 2330 W. JOPPA ROAD, SUITE 107
City-St-Zip: LUTHERVILLE, MD 21093

Title: V () Delete
Name: ABRAHAMS, ROBERT S
Address: 2330 W. JOPPA ROAD, SUITE 107
City-St-Zip: LUTHERVILLE, MD 21093

Title: ST () Delete
Name: SHAPIRO, JOHN
Address: 2330 W. JOPPA ROAD
City-St-Zip: LUTHERVILLE, MD 21093

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: ST (X) Change () Addition
Name: SHAPIRO, JOHN
Address: 2330 W. JOPPA ROAD, SUITE 107
City-St-Zip: LUTHERVILLE, MD 21093

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.

SIGNATURE: JOHN SHAPIRO

Electronic Signature of Signing Officer or Director

S/T

10/04/2007

Date