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PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F97000000181

1. Corporation Name
GRANITE FINANCIAL, INC.

Principal Place of Business	Mailing Address
16100 TABLE MOUNTAIN PKWY SUITE A GOLDEN CO 80403 US	16100 TABLE MOUNTAIN PKWY SUITE A GOLDEN CO 80403 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 01/10/1997

4. FEI Number: 84-1349929 ☐ Applied For ☐ Not Applicable

5. Certifcate of Status Desired ☐ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business (21): Suite, Apt. #, etc. (22): City & State (23): Zip (24) Country (25)

2a. Mailing Address (26): Suite, Apt. #, etc. (27): City & State (28): Zip (29) Country (30)

9. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81 Name: CT CORPORATION SYSTEMS
82 Street Address (P.O. Box Number is Not Acceptable): 1200 S. PINE ISLAND ROAD
83
84 City: PLANTATION FL 85 Zip Code: 33324

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: Richard Viola — RICHARD VIOLA — PRES & COO — 5/19/99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP WHENER, WILLIAM W 8480 W 81ST DR ARVADA CO 80005	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	CEO, D MURPHY, ROBERT 16100 TABLE MOUNTAIN PARKWAY, SUITE A GOLDEN, CO 80403	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FOLEY, WILLIAM P 2510 RED HILL AVE, SUITE 220 SANTA ANA CA 92705	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D FOLEY, WILLIAM 3916 STATE ST, SUITE 300 SANTA BARBARA, CA 93110	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WHITE, LARRY K 16100 TABLE MOUNTAIN PARKWAY, SUITE A GOLDEN CO 80403	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	P VIOLA, RICHARD 16100 TABLE MOUNTAIN PARKWAY, SUITE A GOLDEN, CO 80403	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VS KANE, M'LISS J 2510 RED HILL AVENUE, SUITE 220 SANTA ANA CA 92705	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	VS KANE, M'LISS J. 17911 VON KARMAN AVE., SUITE 300 IRVINE, CA 92614	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	CFOD MEADOWS, ALLEN D 2510 RED HILL AVENUE, SUITE 220 SANTA ANA CA 92705	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	CFOD ~~MEADOWS, ALLEN D~~ STINSON, ALAN 3916 STATE ST, SUITE 300 SANTA BARBARA, CA 93110	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILLEY, FRANK P 2510 RED HILL AVENUE, SUITE 220 SANTA ANA CA 92705	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D WILLEY, FRANK P 3916 STATE ST, SUITE 300 SANTA BARBARA, CA 93110	☒ Change ☐ Addition

CR2E034 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Viola — 4/30/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #