## 2000 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # P98000069916 Apr 21, 2000 8:00 am Secretary of State 1. Entity Name GRANITE POINT PARTNERS, INC. 04-21-2000 90155 016 \*\*\*158.75 Mailing Address Principal Place of Business 2307 S.E. MONTEREY ROAD 2307 S.E. MONTEREY ROAD STUART FL 34996-3331 STUART FL 34996 2. Principal Place of Business 3. Mailing Address 851 SE Monterey Commons Blub. 851 SE Monterey Commons Bld Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Çity & State City & State 4. FEI Number Applied For 65-0859306 Stuart, Fl Stuart, FL Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Maitin Fee Required martin 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KRAMER, ROBERT S Street Address (P.O. Box Number is Not Acceptable) Blvd. 2307 S.E. MONTEREY ROAD SE Monterey Commons STUART FL 34996 cityStua/t 34996 purpose of changing its registered office or registered agent, or both, in the State of Florida. DATE (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. P/D ☐ Addition ☐ Delete TITLE Change KRAMER, ROBERT S KRAMER, ROBERT 5. NAME 853 SE Monterey Commons Blvd. STREET ADDRESS 2307 S.E. MONTEREY ROAD STREET ADDRESS CITY-ST-ZIP STUART FL 34996 CITY-ST-ZIP Delete Addition Change TITLE TITLE James R. Pyne 851 SE monterey Commons Blvd. COTTEN, E L NAME NAME 7791 S.E. LITTLE HARBOR DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Stuart, FL 34996 **HOBE SOUND FL 33455** TITLE ☐ Addition TITLE Delete SULLIVAN, JOHN W SULLIVAN, JOHN W. 851 SE Monterey Commons Blvd. NAME NAME STREET ADDRESS 7407 S.E. HILL TERRACE STREET ADDRESS **HOBE SOUND FL 33455** CITY-ST-ZIP CITY-ST-ZIP Stuart, FL 34996 ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITI F ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

13. I hereby certify that the information supplied with this filling does not qualify 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 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 entrustee employees to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachmen

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

Delete

☐ Change

☐ Addition