

**AFFIDAVIT REGARDING USE OR MAINTENANCE OF IMPROPER OR OUTDATED ADDRESSES**

**Maryland Corporations & Associations Article, §1-201.2**

I, \_\_\_\_\_, hereby certify:

(Full Name)

1. I am eighteen years of age or older, have personal knowledge and sufficient experience to testify to the matters stated herein and am competent to be a witness in a legal proceeding.

2. A. **Complaining Party** – I am the (check ONE only)  **Owner**  **Leaseholder**, I took possession of the property on \_\_\_\_\_, and I believe the use of the below address is in violation of MD CORP & ASSNS §1-201.2.

(Month-Day-Year)

B. **Responding Party** – I am the (check ONE only):  **Resident Agent**  **Authorized Person**, of the entity named in the initial affidavit challenging the address(es) below and I believe the use of the address is not in violation of MD CORP & ASSNS §1-201.2.

3. The following information concerns the entity and address(es) that is/are the subject(s) of this affidavit:

• **Name of Entity:** \_\_\_\_\_.

• **Department Identification Number:** \_\_\_\_\_.

• **Alleged Improper or Outdated Address(es):** Please **check each one that applies** and provide a complete address with street name and number, unit/apartment (if applicable), city, state, and zip code.

Principal Office: \_\_\_\_\_.

Resident Agent: \_\_\_\_\_.

Mailing: \_\_\_\_\_.

4. The factual basis for my belief regarding the use of the address(es) listed above is as follows:

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5. I am providing these documents in support of the factual basis for my belief (e.g., deed, lease etc.):

- a) \_\_\_\_\_
- b) \_\_\_\_\_
- c) \_\_\_\_\_

**I solemnly affirm under the penalties of perjury that the contents of this Affidavit are true to the best of my information, knowledge, and belief.**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Date**

**Printed Name and Address of the Person Signing the Affidavit:**

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## **INSTRUCTIONS FOR COMPLETING THE AFFIDAVIT OF IMPROPER OR OUTDATED ADDRESSES**

**IMPORTANT NOTE:** This form is used by the owner, current leaseholder, or business/entity to challenge or respond to a challenge of the recording of an address with SDAT when improper use or outdated maintenance of such address on record is alleged. This form is NOT used to challenge the existence of an entity/business, the right of an entity/business to operate in Maryland or to resolve private disputes such as alleged trademark infringements or contract breaches.

**INSTRUCTIONS:** Complete the entire form. SDAT will not act on your affidavit if the form is incomplete. You are strongly encouraged to consult with an attorney before filing this affidavit; **SDAT staff cannot assist you in completing this form or provide any other legal advice.**

Heading: Insert the name of the person completing the form.

1. This statement must be true about the person completing the form.
2. If you are the complaining party, use A ONLY, and check either Owner or Leaseholder and provide the date when you became the owner or leaseholder. If you are the responding party, use B ONLY, and check Resident Agent or Authorized Person. Please NOTE: An Authorized Person may include but is not limited to the officers of the entity, an entity principal, or an attorney for the entity/business.
3. Write the complete name of the entity, the department ID number, check the box for the address type, and write out the complete address.
4. State the factual basis for your belief regarding the use of the address(es). EXAMPLES: if you are the complaining party, you may state that you own the property and did not give permission for the business to use your address or that the address continues to be used after permission has been withdrawn or that the business or person no longer has rights to the property or is no longer based/living at the address; If you are the responding party, you may state that you own the property or have other rights to use the property. You may attach additional paper if necessary to continue your statement. SDAT will not consider statements that are not part of this affidavit in deciding whether to void an address. The above examples are not exhaustive.
5. If attaching supporting documents, list the document(s) and briefly describe each attachment. You may attach additional sheets of paper, DO NOT use this section to continue paragraph 4.

MAIL TO:

State Department of Assessments and Taxation,  
ATTN: Charter Legal Affidavit of Improper or Outdated Addresses  
301 W. Preston Street; 8th Floor  
Baltimore, MD 21201-2395

OR

EMAIL TO: [sdatt.prohibitedfilings@maryland.gov](mailto:sdatt.prohibitedfilings@maryland.gov)

Write "Charter Legal Affidavit of Improper or Outdated Addresses" in the subject line.