## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F07000000155

Entity Name: ETHICSPOINT, INC.

**FILED** Mar 29, 2011 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6000 MEADOWS ROAD SUITE 200

LAKE OSWEGO, OR 97035

**New Mailing Address: Current Mailing Address:** 

6000 MEADOWS ROAD SUITE 200 LAKE OSWEGO, OR 97035

FEI Number: 91-2082288 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

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

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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title:

CHILDERS, DAVID Name:

6000 MEADOWS ROAD, SUITE 200 Address: City-St-Zip: LAKE OSWEGO, OR 97035

Title:

Name: MCPEAK, MERRILL A

6000 MEADOWS ROAD, SUITE 200 Address: LAKE OSWEGO, OR 97035 City-St-Zip:

Title:

INSKEEP, JOHN Name:

6000 MEADOWS ROAD, SUITE 200 Address: City-St-Zip: LAKE OSWEGO, OR 97035

Title: CFO

HENNE, TODD Name:

Address: 6000 MEADOWS ROAD, SUITE 200 City-St-Zip:

LAKE OSWEGO, OR 97035

Title:

Name: HENNE, TODD

Address: 6000 MEADOWS ROAD, SUITE 200 City-St-Zip: LAKE OSWEGO, OR 97035

I hereby 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 all other like empowered.

SIGNATURE: TODD J. HENNE **CFO** 03/29/2011