

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N15000002309

**Entity Name:** EASTERN POINT TRUST, INC.**Current Principal Place of Business:**382 NE 191ST STREET  
STE 62193  
MIAMI, FL 33179**Current Mailing Address:**% EASTERN POINT SERVICES  
P.O. BOX 3053  
WARRENTON, VA 20188 US**FEI Number:** 20-8327672**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**URS AGENTS, LLC  
3458 LAKESHORE DRIVE  
TALLAHASSEE, FL 32312 US*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:** CHRISTIAN EUBANKS

01/28/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	ED
Name	DISMAN, ERIC
Address	67 WEST LEE STREET, 201
City-State-Zip:	WARRENTON VA 20186

Title	D
Name	ROBINSON, WHITSON
Address	P.O. BOX 232
City-State-Zip:	WARRENTON VA 20188

Title	D
Name	ROBINSON, GEORGE
Address	4694 MILLENNIUM DR., BLDG 1694, STE 540
City-State-Zip:	BELCAMP MD 21017

Title	C
Name	SIMEON, FLOYD
Address	P.O. BOX 536
City-State-Zip:	WARRENTON VA 20188

Title	OFFICER
Name	KOTT, SAMUEL
Address	403 HOLIDAY COURT
City-State-Zip:	WARRENTON VA 20186

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** SAMUEL KOTT

OFFICER

01/28/2021

Electronic Signature of Signing Officer/Director Detail

Date