

2013 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P33026

FILED
Jan 29, 2013
Secretary of State
CC5918519043

Entity Name: POINTS OF LIGHT FOUNDATION "INCORPORATED"

Current Principal Place of Business:

600 MEANS STREET
SUITE 210
ATLANTA, GA 30318

Current Mailing Address:

600 MEANS STREET
SUITE 210
ATLANTA, GA 30318

FEI Number: 65-0206641

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED
515 E. PARK AVENUE
TALLAHASSEE, FL 32301 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name NUNN, MICHELLE
Address 600 MEANS STREET, SUITE 210
City-State-Zip: ATLANTA GA 30318

Title T
Name TEECE, KRISTINA
Address 600 MEANS STREET, SUITE 210
City-State-Zip: ATLANTA GA 30318

Title D
Name BULLARD, MARCIA
Address 5404 GALENA PLACE, NW
City-State-Zip: WASHINGTON DC 20016

Title D
Name BUSH, NEIL
Address 50 BRIAR HOLLOW LANE, SUITE 200E
City-State-Zip: HOUSTON TX 77027

Title D
Name CHAMBERS, RAYMOND
Address 310 SOUTH STREET, 4TH FLOOR
City-State-Zip: MORRISTOWN, NJ 07960

Title DIRECTOR
Name CALDWELL, KYLE
Address 1048 PIERPONT DRIVE, SUITE 3
City-State-Zip: LANSING MI 48911

Title SECRETARY
Name HOOVER , TRACY
Address 600 MEANS STREET, SUITE 210
City-State-Zip: ATLANTA GA 30318

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: MICHELLE NUNN

PRESIDENT

01/29/2013

Electronic Signature of Signing Officer/Director Detail

Date