

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000003430

Entity Name: NORTHGATEARINSO, INC.

FILED  
Mar 17, 2011  
Secretary of State

**Current Principal Place of Business:**

6625 THE CORNERS PARKWAY SUITE 400  
NORCROSS, GA 30092

**New Principal Place of Business:**

**Current Mailing Address:**

6625 THE CORNERS PARKWAY SUITE 400  
FINANCE DEPT  
NORCROSS, GA 30092

**New Mailing Address:**

FEI Number: 65-1205969

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

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

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: CFO  
Name: MCCARDLE, NATHAN  
Address: 6625 THE CORNERS PARKWAY SUITE 400  
City-St-Zip: NORCROSS, GA 30092

Title: P  
Name: CAMPBELL, SAMUEL V III  
Address: 6625 THE CORNERS PARKWAY SUITE 400  
City-St-Zip: NORCROSS, GA 30092

Title: S  
Name: ALBERGA, NICOLAS  
Address: 6625 THE CORNERS PARKWAY SUITE 400  
City-St-Zip: NORCROSS, GA 30092

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: NICOLAS ALBERGA

S

03/17/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date