

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000005025

Entity Name: GLOWPOINT, INC.

FILED  
Apr 19, 2007  
Secretary of State

## Current Principal Place of Business:

225 LONG AVE.  
HILLSIDE, NJ 07205

## New Principal Place of Business:

## Current Mailing Address:

225 LONG AVENUE  
HILLSIDE, NJ 07205

## New Mailing Address:

FEI Number: 77-0312442

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: CFO ( ) Delete  
Name: HEINEN, EDWIN  
Address: 225 LONG AVE  
City-St-Zip: HILLSIDE, NJ 07205

Title: COO ( ) Delete  
Name: JOSEPH, LAEZZA  
Address: 225 LONG AVE  
City-St-Zip: HILLSIDE, NJ 07205

Title: CEO ( ) Delete  
Name: BRANDOFINO, MICHEAL  
Address: 225 LONG AVENUE  
City-St-Zip: HILLSIDE, NJ 07205

Title: GC ( ) Delete  
Name: ROBINSON, DAVID  
Address: 225 LONG AVE  
City-St-Zip: HILLSIDE, NJ 07205

Title: DC ( ) Delete  
Name: REISS, RICHARD  
Address: 225 LONG AVENUE  
City-St-Zip: HILLSIDE, NJ 07205

Title: D ( ) Delete  
Name: HILTZIK, DEAN  
Address: 100 JERICHO QUADRANGLE  
City-St-Zip: JERICHO, NY 11753

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: EDWIN HEINEN

CFO

04/19/2007

Electronic Signature of Signing Officer or Director

Date