

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000007242

FILED  
Apr 16, 2007  
Secretary of State

Entity Name: FUTUREPOINT, INC.

## Current Principal Place of Business:

287 EAST OAKLAND PARK BLVD.  
FT. LAUDERDALE, FL 33334

## New Principal Place of Business:

## Current Mailing Address:

287 EAST OAKLAND PARK BLVD.  
FT. LAUDERDALE, FL 33334

## New Mailing Address:

FEI Number: 65-1011675

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

O'BRIEN, KEITH  
4520 SW 30TH WAY  
FT. LAUDERDALE, FL 33312 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: P ( ) Delete  
Name: DASSLER, BRIAN  
Address: 510 NE 17TH AVENUE #102  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: D ( ) Delete  
Name: GABA, CHRIS  
Address: 736 INTERCOASTAL DRIVE  
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: T ( ) Delete  
Name: CORDON, REGINE  
Address: 9241 NW 25TH STREET  
City-St-Zip: SUNRISE, FL 33322

Title: D ( ) Delete  
Name: SWINDELL, BOB MR  
Address: 1317 TANGELO ISLE  
City-St-Zip: FORT LAUDERDALE, FL 33315

Title: D ( ) Delete  
Name: GOMEZ, ANGEL  
Address: 1665 BLUE JAY CIRCLE  
City-St-Zip: WESTON, FL 33327

Title: D ( ) Delete  
Name: DOLINER, RICHEL  
Address: 2400 NE 9TH STREET, A-503  
City-St-Zip: FT. LAUDERDALE, FL 33304

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: DASSLER, BRIAN  
Address: 510 NE 17TH AVENUE #102  
City-St-Zip: FT. LAUDERDALE, FL 33301

Title: P (X) Change ( ) Addition  
Name: GABA, CHRIS  
Address: 736 INTERCOASTAL DRIVE  
City-St-Zip: FT. LAUDERDALE, FL 33304

Title: D (X) Change ( ) Addition  
Name: KAPELA, JENE  
Address: 1041 SW 15TH AVE. APT. 6-B  
City-St-Zip: FT. LAUDERDALE, FL 33312

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

SIGNATURE: KEITH O'BRIEN

ED

04/16/2007

Electronic Signature of Signing Officer or Director

Date