2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000101693

City-St-Zip:

WINTER PARK, FL 32789

Entity Name: NORTHPOINT HOLDINGS, INC.

FILED May 17, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 340 ALBERTA DRIVE WINTER PARK, FL 32789 **Current Mailing Address: New Mailing Address:** PO BOX 670 340 ALBERTA DRIVE WINTER PARK, FL 32789 WINTER PARK, FL 32790 FEI Number: 43-1953343 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MELNICK, MICHAEL P MELNICK, MICHAEL P PRES 340 ALBERTA DRIVE 340 ALBERTA DRIVE WINTER PARK, FL 32789 US WINTER PARK, FL 32789 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: MICHAEL P MELNICK 05/17/2007 Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition SANDSTONE HOLDINGS,, LLC Name: Name: 340 ALBERTA DRIVE Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: PD () Delete Title: () Change () Addition Name: MELNICK, MICHAEL P Name: 340 ALBERTA DRIVE Address: Address: WINTER PARK, FL 32789 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition MELNICK, MICHAEL P Name: Name: 340 ALBERTA DRIVE Address: Address:

I hereby certify that the information supplied with this filing does not qualify 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.

City-St-Zip:

SIGNATURE: MICHAEL P. MELNICK PD 05/17/2007