

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000089513

Entity Name: LAPOINTE ASSOCIATES, INC.

FILED
Jan 08, 2008
Secretary of State

Current Principal Place of Business:

2702 CRAIG STREET
FORT MYERS, FL 33901

New Principal Place of Business:

2702 CRAG STREET
FORT MYERS, FL 33901

Current Mailing Address:

2702 CRAIG STREET
FORT MYERS, FL 33901

New Mailing Address:

2702 CRAG STREET
FORT MYERS, FL 33901

FEI Number: 42-1550224

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LA POINTE, JAMES
11640 FOX HILL RD
NORTH FORT MYERS, FL 33917 US

Name and Address of New Registered Agent:

LA POINTE, JAMES
2702 CRAG STREET
FORT MYERS, FL 33901 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:

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LA POINTE, JAMES
Address: 11640 FOX HILL RD
City-St-Zip: NORTH FORT MYERS, FL 33917

Title: VPTD () Delete
Name: PITTRO, DOMINIC
Address: 1926 SW 19TH LN
City-St-Zip: CAPE CORAL, FL 33990

Title: VPD () Delete
Name: LA POINTE, PAUL
Address: 318 SE 20TH CT
City-St-Zip: CAPE CORAL, FL 33990

Title: SD () Delete
Name: LA POINTE, ROCHELLE
Address: 11640 FOX HILL RD
City-St-Zip: NORTH FORT MYERS, FL 33917

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LA POINTE, JAMES
Address: 2702 CRAG STREET
City-St-Zip: FORT MYERS, FL 33901

Title: VPTD (X) Change () Addition
Name: PITTRO, DOMINIC
Address: 2702 CRAG STREET
City-St-Zip: FORT MYERS, FL 33901

Title: VPD (X) Change () Addition
Name: LA POINTE, PAUL
Address: 2702 CRAG STREET
City-St-Zip: FORT MYERS, FL 33901

Title: SD (X) Change () Addition
Name: LA POINTE, ROCHELLE
Address: 2702 CRAG STREET
City-St-Zip: FORT MYERS, FL 33901

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.

SIGNATURE: JAMES LA POINTE

PD

01/08/2008

Electronic Signature of Signing Officer or Director

Date