

# 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000085053

FILED  
Sep 13, 2007  
Secretary of State

Entity Name: NORTHPOINTE SERVICES, INC.

## Current Principal Place of Business:

12300 HOLSTEIN DRIVE  
JACKSONVILLE, FL 32226

## New Principal Place of Business:

## Current Mailing Address:

12300 HOLSTEIN DRIVE  
JACKSONVILLE, FL 32226

## New Mailing Address:

FEI Number: 56-2461489

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MOORE, TERESA S  
12300 HOLSTEIN DRIVE  
JACKSONVILLE, FL 32226 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: PT ( ) Delete  
Name: MOORE, TERESA S  
Address: 12300 HOLSTEIN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VS ( ) Delete  
Name: MOORE, DOUGLAS I  
Address: 12300 HOLSTEIN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: V ( ) Delete  
Name: MOORE, MICHAEL  
Address: 12300 HOLSTEIN DR  
City-St-Zip: JACKSONVILLE, FL 32226

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MOORE, TERESA S  
Address: 12300 HOLSTEIN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: STD (X) Change ( ) Addition  
Name: MOORE, DOUGLAS I  
Address: 12300 HOLSTEIN DRIVE  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VD (X) Change ( ) Addition  
Name: MOORE, MICHAEL  
Address: 12300 HOLSTEIN DR  
City-St-Zip: JACKSONVILLE, FL 32226

Title: VD ( ) Change (X) Addition  
Name: IRION SR, ROBERT K  
Address: 12300 HOLSTEIN DR  
City-St-Zip: JACKSONVILLE, FL 32226

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: TERESA S. MOORE

PD

09/13/2007

Electronic Signature of Signing Officer or Director

Date