

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000099210

FILED  
Apr 29, 2009  
Secretary of State

Entity Name: FIVE POINTS CORPORATION

## Current Principal Place of Business:

3389 SHERIDAN STREET  
558  
HOLLYWOOD, FL 33021

## New Principal Place of Business:

5440 S. STATE RD 7  
HOLLYWOOD, FL 33314 US

## Current Mailing Address:

3389 SHERIDAN STREET  
558  
HOLLYWOOD, FL 33021

## New Mailing Address:

FEI Number: 74-3125554      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SMITH, AUDREY ESQ.  
4161 NORTH STATE ROAD 7  
HOLLYWOOD, FL 33021 US

## Name and Address of New Registered Agent:

SMITH, AUDREY ESQ.  
5440 S ST RD 7  
HOLLYWOOD, FL 33314 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:

04/29/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: LAWRENCE, KRISHNA  
Address: 3389 SHERIDAN STREET #558  
City-St-Zip: HOLLYWOOD, FL 33021

Title: D ( ) Delete  
Name: SMITH, AUDREY ESQ.  
Address: 3389 SHERIDAN STREET #558  
City-St-Zip: HOLLYWOOD, FL 33021

Title: S ( ) Delete  
Name: SMITH, AUDREY  
Address: 3389 SHERIDAN STREET #558  
City-St-Zip: HOLLYWOOD, FL 33021

Title: OMB ( ) Delete  
Name: LAWRENCE, AMY  
Address: 3389 SHERIDAN STREET #558  
City-St-Zip: HOLLYWOOD, FL 33021

Title: VPT (X) Delete  
Name: MOODY, LINDA  
Address: 3389 SHERIDAN STREET #558  
City-St-Zip: HOLLYWOOD, FL 33021

## 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: VPT (X) Change ( ) Addition  
Name: MOODY, LINDA  
Address: 3389 SHERIDAN ST #558  
City-St-Zip: HOLLYWOOD, FL 33021

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

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: AUDREY SMITH

S

04/29/2009

Electronic Signature of Signing Officer or Director

Date