2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

changed, or on an attachment with an ado

SIGNATURE:

FILED Apr 27, 2007 08:00 A Secretary of State **DOCUMENT # P98000034241** WAYPOINT, INC. Principal Place of Business Mailing Address **1005 AUTUMN LEAF DRIVE** 1005 AUTUMN LEAF DRIVE WINTER GARDEN, FL. 34787 WINTER GARDEN, FL 34787 CR2E034 (11/05) No Cha-P 04232007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3468421 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GUNTER, MATTHEW C DO NOT WRITE 1005 AUTUMN LEAF DRIVE WINTER GARDEN, FL 34787 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Sconsture, typed or printed name of moistered event and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS PSD TITLE NAME GILBERT, MICHAEL TODD 6148 WESTGATE DRIVE, APT. 303 STREET ADORESS ORLANDO, FL 32835 CITY-ST-ZIP U00000738624 05/11/07-80075-016 158.75 VPD TITLE NAME **GUNTER, MATTHEW C** 1005 AUTUMN LEAF DR STREET ADDRESS CATY-ST-ZIP WINTER GARDEN, FL 34787 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if

4/7.2/07