2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000109453

Entity Name: SPINNAKER FINANCIAL SERVICES, INC.

FILED Jan 12, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
--------------------------------------	----------------------------------

3450 LAKESIDE DRIVE SUITE 400 MIRAMAR, FL 33027

Current Mailing Address: New Mailing Address:

3450 LAKESIDE DRIVE SUITE 400 MIRAMAR, FL 33027

OFFICERS AND DIRECTORS:

FEI Number: 59-3615941 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PETER, MCGRAIL

3450 LAKESIDE DRIVE

SUITE 400

MIRAMAR, FL 33027 US

COMPUPAY, INC.

3450 LAKESIDE DRIVE

SUITE 400

MIRAMAR, FL 33027 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: TOM SENNOTT 01/12/2007

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 ().

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CFO () Delete Title: CFO (X) Change () Addition

 Name:
 MCGRAIL, PETER
 Name:
 DREW, CARL

 Address:
 3450 LAKESIDE DRIVE, STE 400
 Address:
 3450 LAKESIDE DRIVE, STE 400

City-St-Zip: MIRAMAR, FL 33027 City-St-Zip: MIRAMAR, FL 33027

Title: CEO () Delete Title: () Change () Addition

 Name:
 LATHROP, CHARLES
 Name:

 Address:
 3450 LAKESIDE DRIVE, STE 400
 Address:

 City-St-Zip:
 MIRAMAR, FL 33027
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CARL DREW CFO 01/12/2007