

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000079125

Entity Name: POINTE GROUP MANAGEMENT, INC.

Current Principal Place of Business:

13218 WEST BROWARD BLVD
PLANTATION, FL 33325

Current Mailing Address:

C/O POINTE GROUP ADVISORS
13218 WEST BROWARD BLVD
PLANTATION, FL 33325 US

FEI Number: 20-0099891

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARDNER, PETER C
C/O POINTE GROUP ADVISORS
13218 WEST BROWARD BLVD
PLANTATION, FL 33325 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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P/D
Name GARDNER, PETER C
Address C/O POINTE GROUP ADVISORS
13218 WEST BROWARD BLVD
City-State-Zip: PLANTATION FL 33325

Title ST
Name FITZGERALD, LUCETTE L
Address C/O POINTE GROUP ADVISORS
13218 WEST BROWARD BLVD
City-State-Zip: PLANTATION FL 33325

Title D
Name HAMILTON, ALFRED
Address C/O POINTE GROUP ADVISORS
13218 WEST BROWARD BLVD
City-State-Zip: PLANTATION FL 33325

Title DV
Name DRISCOLL, WILLIAM L
Address C/O POINTE GROUP ADVISORS
13218 WEST BROWARD BLVD
City-State-Zip: PLANTATION FL 33325

I hereby 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 all other like empowered.

SIGNATURE: PETER C GARDNER

PRESIDENT

03/23/2015

Electronic Signature of Signing Officer/Director Detail

Date