

2021 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000005162

Entity Name: SPRING POINT PROJECT CORPORATION**Current Principal Place of Business:**121 SOUTH EIGHTH ST, SUITE 822
MINNEAPOLIS, MN 55402**Current Mailing Address:**121 SOUTH EIGHTH ST, SUITE 822
MINNEAPOLIS, MN 55402 US**FEI Number:** 20-1896813**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**RICE, WILLIAM
20080 SEAGROVE ST UNIT 2003
ESTERO, FL 34928 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 PED
Name SPIZZO, TOM
Address 121 SOUTH EIGHTH ST, SUITE 822
City-State-Zip: MINNEAPOLIS MN 55402

Title SD
Name VETTER, MARTHA
Address 121 SOUTH EIGHTH ST, SUITE 822
City-State-Zip: MINNEAPOLIS MN 55402

Title TD
Name MURPHY, STEVE
Address 121 SOUTH EIGHTH ST, SUITE 822
City-State-Zip: MINNEAPOLIS MN 55402

Title CD
Name RYAN, PATRICK
Address 121 SOUTH EIGHTH ST, SUITE 822
City-State-Zip: MINNEAPOLIS MN 55402

Title VCD
Name CLARK, TIM
Address 121 SOUTH EIGHTH ST, SUITE 822
City-State-Zip: MINNEAPOLIS MN 55402

Title DIRECTOR
Name CHRIS, GRETSCHER
Address 121 SOUTH EIGHTH ST, SUITE 822
City-State-Zip: MINNEAPOLIS MN 55402

Title DIRECTOR
Name MIKE, GRETSCHER
Address 121 SOUTH EIGHTH ST, SUITE 822
City-State-Zip: MINNEAPOLIS MN 55402

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TOM SPIZZO**EXECUTIVE DIRECTOR****02/16/2021**

Electronic Signature of Signing Officer/Director Detail

Date