

1.) CORPORATION NAME:

Harbour Pointe Acquisition Company

DUE DATE: **2/29/2012**

SCC ID NO: **F1659129**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E.**

AUTH IN VI

CT CORPORATION SYSTEM

4701 COX RD STE 301

GLEN ALLEN, VA 23060

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	200

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: P O BOX 5005

CITY/ST/ZIP: NEW YORK, NY 10163-5005

7.) DIRECTORS AND PRINCIPAL OFFICERS:

All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: BENJAMIN G GIFFORD
TITLE: DIR/PRES
ADDRESS: 270 PARK AVE 7TH FLOOR
CITY/ST/ZIP/CO: NEW YORK, NY 10017-

OFFICER

DIRECTOR

NAME: ETHEL GAVRILOVA
TITLE: OFF/VP/SEC
ADDRESS: 270 PARK AVENUE
CITY/ST/ZIP/CO: NEW YORK, NY 10017-

OFFICER

DIRECTOR

NAME: ALFRED W DORT
TITLE: DIRECTOR
ADDRESS: 270 PARK AVE 7TH FLOOR
CITY/ST/ZIP/CO: NW YORK, NY 10017-

OFFICER

DIRECTOR

NAME: KEIN J FAXON
TITLE: DIRECTOR
ADDRESS: 270 PARK AVE 7TH FLOOR
CITY/ST/ZIP/CO: NEW YORK, NY 10017-

OFFICER

DIRECTOR

NAME: ANNE S PFEIFFER
TITLE: DIRECTOR
ADDRESS: 270 PARK AVENUE
CITY/ST/ZIP/CO: NEW YORK, NY 10017-

OFFICER

DIRECTOR

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

<u>/s/ ETHEL GAVRILOVA</u>	<u>ETHEL GAVRILOVA, OFF/VP/SEC</u>	<u>2/21/2012</u>
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.