

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F15000003429

Entity Name: CRADLEPOINT, INC.

**Current Principal Place of Business:**

1111 W JEFFERSON STREET, SUITE 400  
BOISE, ID 83702

**Current Mailing Address:**

1111W JEFFERSON STREET, SUITE 400  
BOISE, ID 83702 US

FEI Number: 68-0633402

Certificate of Status Desired: No

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

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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 CEO AND CHAIRMAN OF THE BOARD  
Name MULHERN, GEORGE  
Address 1111 W JEFFERSON STREET, SUITE 400  
City-State-Zip: BOISE ID 83702

Title DIRECTOR  
Name LEWIS, LEGRAND  
Address 1111 W JEFFERSON STREET, SUITE 400  
City-State-Zip: BOISE ID 83702

Title DIRECTOR  
Name LANGELE, GERARD  
Address 1111 W JEFFERSON STREET, SUITE 400  
City-State-Zip: BOISE ID 83702

Title DIRECTOR  
Name BELLUZZO, RICHARD  
Address 1111 W JEFFERSON STREET, SUITE 400  
City-State-Zip: BOISE ID 83702

Title CFO  
Name HEUSINKVELD, VAL  
Address 1111 W JEFFERSON STREET, SUITE 400  
City-State-Zip: BOISE ID 83702

Title DIRECTOR  
Name WARNOCK, GREG  
Address 1111 W JEFFERSON STREET, SUITE 400  
City-State-Zip: BOISE ID 83702

Title DIRECTOR  
Name MYER, MIKE  
Address 1111 W JEFFERSON STREET, SUITE 400  
City-State-Zip: BOISE ID 83702

Title DIRECTOR  
Name MIKA, RON  
Address 1111 W JEFFERSON STREET, SUITE 400  
City-State-Zip: BOISE ID 83702

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*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: VAL HEUSINKVELD

CFO

03/16/2018

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name GILSTRAP, DOUG  
Address 1111 W JEFFERSON STREET, SUITE 400  
City-State-Zip: BOISE ID 83702

Title SECRETARY  
Name BOYD, PAUL  
Address 1111 W JEFFERSON STREET, SUITE 400  
City-State-Zip: BOISE ID 83702

Title DIRECTOR  
Name COONS, THEODORE  
Address 1111 W JEFFERSON STREET, SUITE  
400  
City-State-Zip: BOISE ID 83702