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Apr 11 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 731837 (1)

1. Corporation Name

BAY POINT STUDIO VILLAS III ASSOCIATION, INC.



Principal Place of Business

Mailing Address

BAY POINT
BOX 9368
PANAMA CITY FL 32417-9368BAY POINT
BOX 9368
PANAMA CITY FL 32417-93683. Date Incorporated or Qualified
02/10/19753a. Date of Last Report
04/09/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1799289

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WARD, RUSTY
BAY POINT
PANAMA CITY FL 32411

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME HANAHAN, LABRUCE
STREET ADDRESS 1601 W. MAIN ST
CITY-ST-ZIP DOTHAN AL1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPTITLE PD ☐ DELETE
NAME WARD, RUSTY
STREET ADDRESS BAY POINT
CITY-ST-ZIP PANAMA CITY, FL 000002.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS Box 27613 (NA)
2.4 CITY-ST-ZIPTITLE STD ☐ DELETE
NAME STONER, BOB
STREET ADDRESS BAY POINT
CITY-ST-ZIP PANAMA CITY FL3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS Box 27757 (NA)
3.4 CITY-ST-ZIPTITLE VD ☐ DELETE
NAME CARROLL, FRANK
STREET ADDRESS BAY POINT
CITY-ST-ZIP PANAMA CITY FL4.1 TITLE ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS Box 1929 (NA)
4.4 CITY-ST-ZIP Ozark, ALTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Rusty Ward

3/15/97

904-234-0041

Date

Daytime Phone #0009867

CR2E037 (9/96)