

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742940

FILED
Apr 21, 2009
Secretary of State

Entity Name: BAY POINT FACILITIES, INC.

Current Principal Place of Business:

1944 BAY POINT BLVD.
MILTON, FL 32583

New Principal Place of Business:

Current Mailing Address:

1944 BAY POINT BLVD.
MILTON, FL 32583

New Mailing Address:

FEI Number: 59-1964725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DIXON, SANDRA
1943 BAY POINT BLVD
MILTON, FL 32583 US

Name and Address of New Registered Agent:

FIGGINS, RONALD G
889 DOLPHIN RD
MILTON, FL 32583 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: RONALD G FIGGINS

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HOWELL, KYE
Address: 4043 WOODLAND DR
City-St-Zip: VILLA RICA, GA 30180

Title: VPD () Delete
Name: MITCHELL, DANIEL
Address: 1950 BAYPOINT BLVD
City-St-Zip: MILTON, FL 32583

Title: SD () Delete
Name: DIXON, SANDRA
Address: 1943 BAY POINT BLVD
City-St-Zip: MILTON, FL 32583

Title: TD () Delete
Name: FIGGINS, RONALD
Address: 889 DOLPHIN RD
City-St-Zip: MILTON, FL 32583

Title: D () Delete
Name: WEHRLE, JAMES
Address: 1932 BAY POINT BLVD
City-St-Zip: MILTON, FL 32583

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change () Addition
Name: FIGGINS, RONALD G
Address: 889 DOLPHIN RD
City-St-Zip: MILTON, FL 32583

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: DIXON, SANDRA
Address: 740 MAYFAIR LN
City-St-Zip: KENNER, LA 70065

Title: D (X) Change () Addition
Name: ROSS, BEN
Address: 1824 DEEP CREEK CT
City-St-Zip: SAN JOSE, CA 95148

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: RONALD G FIGGINS

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date