

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725862

Entity Name: BAY POINT GOLF VILLAS II ASSOCIATION INC**Current Principal Place of Business:**BAY POINT GOLF VILLAS II
4305 BAY POINT ROAD
PANAMA CITY, FL 32408**Current Mailing Address:**BAY POINT GOLF VILLAS II
P. O. BOX 28025
PANAMA CITY, FL 32411 US**FEI Number:** 59-1513453**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MIDDLETON, MARTHA A.
2702 WOODMERE DRIVE
PANAMA CITY, FL 32405 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:** MARTHA A. MIDDLETON

03/27/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name BREault, CANDICE
Address 4305 BAY POINT ROAD
UNIT 4447C
City-State-Zip: PANAMA CITY FL 32408

Title DIRECTOR
Name BRADFORD, BILL
Address P. O. BOX 27369
City-State-Zip: PANAMA CITY FL 32411

Title CORRESPONDING SECRETARY
Name MIDDLETON, MARTHA A.
Address 2702 WOODMERE DRIVE
City-State-Zip: PANAMA CITY FL 32405

Title SECRETARY
Name SHAW, MEREDITH
Address P. O. BOX 27793
City-State-Zip: PANAMA CITY FL 32411

Title DIRECTOR
Name GRIFFIN, TRISH
Address RR6 8726 COUNTY ROAD 2
City-State-Zip: NAPANEE, ONTARIO CANADA K7R-3L1

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: MARTHA A. MIDDLETON**CORRESPONDING
SECRETARY**

03/27/2020

Electronic Signature of Signing Officer/Director Detail

Date