

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 731837

Entity Name: BAY POINT STUDIO VILLAS III ASSOCIATION, INC.**Current Principal Place of Business:**BAY POINT STUDIO VILLAS III
4500 KINGFISH ROAD
PANAMA CITY, FL 32408**Current Mailing Address:**BAY POINT STUDIO VILLAS III
BOX 9368
PANAMA CITY, FL 32417-9368**FEI Number:** 59-1799289**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ERICKSON, GARY
4500 KINGFISH RD.
4279
PANAMA CITY, FL 32408 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:** GARY ERICKSON

02/12/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :Title DIRECTOR
Name BARFIELD, JUSTIN
Address 4500 KINGFISH ROAD #4283
City-State-Zip: PANAMA CITY FL 32408Title PRESIDENT
Name WINDHAM, JOHNNY
Address 113 NORTH BAY STREET
City-State-Zip: SAMSON AL 36477Title SD
Name ERICKSON, GARY
Address 4500 KINGFISH ROAD #4279
City-State-Zip: PANAMA CITY FL 32408Title DIRECTOR, TREASURER
Name DUPLANTIS, PATRICK
Address 4500 KINGFISH ROAD #4176
City-State-Zip: PANAMA CITY FL 32408Title DIRECTOR
Name LOYED, ALLAN
Address 205 KELSO LANE
City-State-Zip: DOTHAN AL 36305Title DIRECTOR
Name HODGES, WALT
Address 4500 KINGFISH ROAD #4177
City-State-Zip: PANAMA CITY FL 32408Title DIRECTOR
Name KELLEY, CHUCK
Address 4500 KINGFISH ROAD #4174
City-State-Zip: PANAMA CITY FL 32408

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: GARY ERICKSON**SECRETARY**

02/12/2018

Electronic Signature of Signing Officer/Director Detail

Date