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 above, or on an attachment with all other like empowered.	my name appears
SIGNATURE: DENISE HINDES	03/02/2023

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

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N9700000898

Entity Name: BAY POINT WEST PROPERTY OWNER'S ORGANIZATION, INC.

Current Principal Place of Business:

4000 MARRIOTT DRIVE SUITE C PANAMA CITY BEACH, FL 32408

Current Mailing Address:

P.O. BOX 28203 BAY POINT, FL 32411-7089 US

FEI Number: 59-2997526

Name and Address of Current Registered Agent:

BAY POINT COMMUNITY ASSOCIATION, INC 4000 MARRIOTT DRIVE SUITE C BAY POINT, FL 32408 US FILED Mar 02, 2023 Secretary of State 5426348248CC

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

Title	VP	Title	PRESIDENT
Name	RANKIN, WALT	Name	HORD, STEVE
Address	P.O. BOX 28203	Address	P.O. BOX 28203
City-State-Zip:	BAY POINT FL 32411-7089	City-State-Zip:	BAY POINT FL 32411-7089
Title	TREASURER		
Name	HINDES, DENISE		
Address	P.O. BOX 28203		
City-State-Zip:	BAY POINT FL 32411-7089		

Date