2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000898

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

FILED
Mar 06, 2015
Secretary of State
CC4550410522

Current Principal Place of Business:

4000 MARRIOTT DRIVE

SUITE C

PANAMA CITY BEACH, FL 32408

Current Mailing Address:

P O BOX 28441

BAY POINT, FL 32411-8441 US

FEI Number: 59-2997526 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BAY POINT COMMUNITY ASSOCIATION, INC 4000 MARRIOTT DRIVE C

BAY POINT, 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title SECRETARY, TREASURER SHAW, BOB BENNETT, JEREMY Name Name 464 WAHOO ROAD 137 MARLIN CIRCLE Address Address City-State-Zip: BAY POINT FL 32411-7743 City-State-Zip: BAY POINT FL 32411-7268

Title VD Title DIRECTOR

NameCOOPER, MICHAELNameRUDHALL, TRACYAddressP O BOX 28465AddressP O BOX 27579

City-State-Zip: PANAMA CITY BEACH FL 32411 City-State-Zip: PANAMA CITY BEACH FL 32411

TitleDIRECTORTitleDIRECTORNameRADCLIFF, MICHAELNameRESCH, DEANAddressP O BXO 27125AddressP O BOX 28492

City-State-Zip: PANAMA CITY BEACH FL 32411-7125 City-State-Zip: PANAMA CITY BEACH FL 32411-8492

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: BOB SHAW PRESIDENT 03/06/2015