

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P96000002858

**Entity Name:** BAY POINT PROPERTY OWNERS SERVICES CO., INC.**Current Principal Place of Business:**4000 MARRIOTT DR  
STE C  
PANAMA CITY, FL 32408**Current Mailing Address:**PO BOX 27089  
BAY POINT, FL 32411-7089 US**FEI Number:** 59-2997526**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**GUARINO, ALLAN  
399 WAHOO ROAD  
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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VD  
Name MILLER, ROBERT  
Address 244 MARLIN CIRCLE  
City-State-Zip: PANAMA CITY FL 32411-7579

Title TREASURER  
Name JONES, RONALD  
Address P O BOX 27399  
City-State-Zip: PANAMA CITY BEACH FL 32411

Title DIRECTOR  
Name CLARK, DWIGHT  
Address P O BOX 27429  
City-State-Zip: PANAMA CITY BEACH FL 32411

Title DIRECTOR  
Name SCHREIBER, ADAM  
Address P O BOX 27085  
City-State-Zip: PANAMA CITY BEACH FL 32411

Title PD  
Name GUARINO, ALLAN  
Address 399 WAHOO RD  
City-State-Zip: BAY POINT FL 32411-8214

Title DIRECTOR  
Name MCCURDY, GRETCHEN  
Address 4000 MARRIOTT DR  
A  
City-State-Zip: PANAMA CITY BEACH FL 32411

Title DIRECTOR  
Name ADE, RONALD  
Address P O BOX 27832  
City-State-Zip: PANAMA CITY BEACH FL 32411

Title DIRECTOR  
Name PRATT, FRANKLIN  
Address 2109 COUNTRY CLUB DR  
City-State-Zip: LYNN HAVEN FL 32444

**Continues on page 2**

*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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** ALLAN GUARINO**PRESIDENT****04/18/2014**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                 DIRECTOR  
Name                HARDY, DEVON  
Address             P O BOX 27661  
City-State-Zip:    PANAMA CITY BEACH FL 32411

Title                 DIRECTOR  
Name                KENNEDY, JACK  
Address             P O BOX 27774  
City-State-Zip:    PANAMA CITY BEACH FL 32411

Title                 SECRETARY  
Name                DANIELS, RUTHANN  
Address             P O BOX 27534  
City-State-Zip:    PANAMA CITY BEACH FL 32411