2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 25, 2005
Secretary of State

DOCUMENT# 723782

Entity Name: BAY POINT HARBOUR VILLAS, INC.

Current Principal Place of Business:

BAY POINT ROAD
BAY POINT, POB 27065
PANAMA CITY, FL 324114065

New Principal Place of Business:

Current Mailing Address:

BAY POINT ROAD
BAY POINT, POB 27065
PANAMA CITY, FL 324114065

New Mailing Address:

FEI Number: 59-1445246 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DRAKE JON D.
4162 BAY POINT RD
PANAMA CITY, FL 32411 US

Name and Address of New Registered Agent:

DRAKE JON D.
2207 ANNE AVENUE
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: _____ 07/25/2005
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: HARRIS, THEONNE
Address: P.O. BOX 27477 N/A
City-St-Zip: PANAMA CITY, FL 32411

Title: SD ( ) Delete
Name: CORCORAN, LINDA
Address: P.O. BOX 28076 N/A
City-St-Zip: PANAMA CITY, FL 32411

Title: PD ( ) Delete
Name: MCMACKIN, JOYCE,
Address: 4151 BAY POINT ROAD
City-St-Zip: PANAMA CITY, FL 32411

Title: TD ( ) Delete
Name: MARTIN, MARTI
Address: P.O. BOX 27842N/A
City-St-Zip: PANAMA CITY, FL 32411

Title: D ( ) Delete
Name: HOYT, STEVE
Address: P.O. BOX 28452 N/A
City-St-Zip: PANAMA CITY, FL 32411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JOYCE MCMACKIN PRES 07/25/2005
Electronic Signature of Signing Officer or Director — Date