

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 725861

FILED
Mar 24, 2005
Secretary of State

Entity Name: BAY POINT GOLF VILLAS I ASSOCIATION INC

Current Principal Place of Business:

DELLWOOD BEACH ROAD
BAY POINT, BOX 27075
PANAMA CITY, FL 32411 US

New Principal Place of Business:

4300 BAY POINT ROAD
BAY POINT, BOX 27075
PANAMA CITY, FL 32411 US

Current Mailing Address:

DELLWOOD BEACH ROAD
BAY POINT, BOX 27075
PANAMA CITY, FL 324114075

New Mailing Address:

BAY POINT
P. O. BOX 27075
PANAMA CITY, FL 324114075

FEI Number: 23-7354698

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIDDLETON, MARTHA A
2702 WOODMERE DR
PANAMA CITY, FL 32405 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D (X) Delete
Name: DOWNER, MRS. K.C.,
Address: 4300 BAY POINT RD UNIT 425
City-St-Zip: PANAMA CITY, FL 32411

Title: S () Delete
Name: MIDDLETON, MARTHA A
Address: 2702 WOODMERE DR
City-St-Zip: PANAMA CITY, FL 32405

Title: VD () Delete
Name: GOULD, GERALD
Address: 2329 MAGNOLIA DR
City-St-Zip: PANAMA CITY, FL 32408

Title: PD () Delete
Name: HEWETT, JOHN
Address: 4300 BAY POINT RD UNIT 408
City-St-Zip: PANAMA CITY, FL 32408

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: PD (X) Change () Addition
Name: HEWETT, JOHN
Address: 4300 BAY POINT RD UNIT 408, BOX 27903
City-St-Zip: PANAMA CITY, FL 32411

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: MARTHA A. MIDDLETON

S

03/24/2005

Electronic Signature of Signing Officer or Director

Date