

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727029

FILED  
Feb 27, 2012  
Secretary of State

**Entity Name:** BAY POINT GOLF VILLAS III ASSOCIATION, INC.

**Current Principal Place of Business:**

BAY POINT  
4301 BAY POINT ROAD  
PANAMA CITY, FL 32408

**New Principal Place of Business:**

**Current Mailing Address:**

BOX 9368,  
PANAMA CITY, FL 324179368

**New Mailing Address:**

BOX 9368,  
PANAMA CITY BEACH, FL 324179368

**FEI Number:** 59-1513452

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DAVISON, DALE  
4301 BAY POINT ROAD  
#4478  
PANAMA CITY, FL 32408 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: PD  
Name: DAVISON, DALE  
Address: 4301 BAY POINT ROAD, #4478  
City-St-Zip: PANAMA CITY, FL 32408

Title: TD  
Name: WEAVER, TOM  
Address: 4301 BAY POINT ROAD, #4473  
City-St-Zip: PANAMA CITY, FL 32408

Title: D  
Name: SMOKER, JASON  
Address: 4301 BAY POINT ROAD, #4490  
City-St-Zip: PANAMA CITY, FL 32408

Title: SD  
Name: AUSTIN, KATHLEEN  
Address: 4301 BAY POINT ROAD, #4486  
City-St-Zip: PANAMA CITY, FL 32408

Title: D  
Name: LUBIN, BARBARA  
Address: 4301 BAY POINT ROAD, #4472  
City-St-Zip: PANAMA CITY, FL 32408

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: JASON SMOKER

D

02/27/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date