FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 APR 17 PM 1:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F77464** **(8)**

1. Corporation Name
BAY POINT REALTY, INC.

Principal Place of Business	Mailing Address
285 PEACHTREE CTR. AVE. SUITE 300 ATLANTA GA 30303	P.O. BOX 56706 ATLANTA GA 30343

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 04/23/1982
3a. Date of Last Report: 04/27/1994

2. Principal Place of Business	2a. Mailing Address
21 1201 W.Peachtree ST,NE	26 1201 W.Peachtree ST,NE
Suite, Apt. #, etc. 22 Suite 1800	Suite, Apt. #, etc. 27 Suite 1800
City & State 23 Atlanta, Georgia	City & State 28 Atlanta, Georgia
Zip / Country 24 30309-3415 25 US	Zip / Country 29 30309-3415 30 US

4. FEI Number: 59-2183797 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	P/D	☒ Change ☐ Addition
NAME	RAY, PATRICIA J	1.2 NAME	RAY, PATRICIA J	
STREET ADDRESS	285 PEACHTREE CTR. AVE. STE. 300	1.3 STREET ADDRESS	1201 W.Peachtree ST,NE, Suite 1800	
CITY-ST-ZIP	ATLANTA GA 30303	1.4 CITY-ST-ZIP	Atlanta, Georgia 30309-3415	
TITLE	D	2.1 TITLE	DS	☒ Change ☐ Addition
NAME	CUMMINS, MICHAEL G	2.2 NAME	CUMMINS, MICHAEL G	
STREET ADDRESS	285 PEACHTREE CTR. AVE. STE. 300	2.3 STREET ADDRESS	1201 W.Peachtree ST,NE, Suite 1800	
CITY-ST-ZIP	ATLANTA GA 30303	2.4 CITY-ST-ZIP	Atlanta, Georgia 30309-3415	
TITLE	D	3.1 TITLE		☒ Change ☐ Addition
NAME	PAYNE, RICHARD	3.2 NAME		
STREET ADDRESS	285 PEACHTREE CTR. AVE. STE. 300	3.3 STREET ADDRESS	1201 W.Peachtree ST,NE,Suite 1800	
CITY-ST-ZIP	ATLANTA GA 30303	3.4 CITY-ST-ZIP	Atlanta, Georgia 30309-3415	
TITLE	PT	4.1 TITLE	T	☐ Change ☒ Addition
NAME	NATSON, RONALD	4.2 NAME	FERREBEE, SUBRENA	
STREET ADDRESS	285 PEACHTREE CTR. AVE. STE. 300	4.3 STREET ADDRESS	1201 W.Peachtree ST, NE, Suite 1800	
CITY-ST-ZIP	ATLANTA GA 30303	4.4 CITY-ST-ZIP	Atlanta, Georgia 30309-3415	
TITLE	S	5.1 TITLE		☐ Change ☐ Addition
NAME	WATSON, DAVID	5.2 NAME		
STREET ADDRESS	285 PEACHTREE CTR. AVE. STE. 300	5.3 STREET ADDRESS	~~1201 W.Peachtree ST, NE, Suite 1800~~	
CITY-ST-ZIP	ATLANTA GA 30303	5.4 CITY-ST-ZIP	~~Atlanta, Georgia 30309-3415~~	
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 4/12/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000961 CP