

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000003462

1. Entity Name
WEST POINT PROPERTIES, INC.



Principal Place of Business
144 S. THOMAS ST.
SUITE-A
TUPELO MS 38801

Mailing Address
PO BOX 4200
TUPELO MS 38803-4200

2. Principal Place of Business
218 South Thomas St.

3. Mailing Address

Suite, Apt. #, etc.
Suite 114

Suite, Apt. #, etc.

City & State
Tupelo, MS

City & State

Zip
28801

Country
Lee

Zip

Country

4. FEI Number 64-0828868

Applied For
Not Applicable

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

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PTD ☐ Delete
NAME MCDADE JR, ROBERT E
STREET ADDRESS 144 SOUTH THOMAS ST, STE-A
CITY-ST-ZIP TUPELO MS 38801

TITLE S ☐ Delete
NAME KAY, MASON L
STREET ADDRESS 144 S. THOMAS ST., SUITE A
CITY-ST-ZIP TUPELO MS 38801

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PTD ☒ Change ☐ Addition
NAME MCDADE JR, ROBERT E
STREET ADDRESS 218 SOUTH THOMAS ST, STE-114
CITY-ST-ZIP Tupelo, MS 38801

TITLE S ☒ Change ☐ Addition
NAME MASON, L Kay
STREET ADDRESS 218 SOUTH THOMAS ST., STE-114
CITY-ST-ZIP TUPELO, MS 38801

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: By: Robert E. Mc President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/03 662 840-3322
Date Daytime Phone #

CR2E034 (10/02)

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90153 007 ***150.00

