2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2009
Secretary of State

DOCUMENT# N05522

Entity Name: THE BAY POINT ANTERIOR SEGMENT SYMPOSIUM, INC.

Current Principal Place of Business:

HARBOR VILLAS 4237 BAY POINT RD.
PO BOX 28389 BAY POINT
PANAMA CITY BEACH, FL 32411

New Principal Place of Business:

HARBOR VILLAS 4237 BAY POINT RD.
PANAMA CITY BEACH, FL 32411

Current Mailing Address:

HARBOR VILLAS 4237 BAY POINT RD.
PO BOX 28389 BAY POINT
PANAMA CITY BEACH, FL 32411

New Mailing Address:

FEI Number: 59-2480516 **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:

MOLINARI, DR. JOSEPH F.
184 MARLIN CIRCLE
PANAMA CITY, FL 32411 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 ( ) Delete
Name: ROWEY, JOSEPH
Address: 148 SOCIAL ST.
City-St-Zip: WOORESOCKET, RI 02895 US

Title: D ( ) Delete
Name: CHANG, FREDDY W
Address: 1245 MADISON AVENUE
City-St-Zip: MEMPHIS, TN 38104

Title: D ( ) Delete
Name: BARSAESS, DONNA M
Address: 29 PINERIDGE RD
City-St-Zip: OXFORD, MA 01540

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition
Name: BARSNESS, DONNA M
Address: 29 PINERIDGE RD
City-St-Zip: OXFORD, MA 01540

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JOSEPH F. MOLINARI S.C 07/06/2009

Electronic Signature of Signing Officer or Director — Date