2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2009
Secretary of State

DOCUMENT# N06000004371

Entity Name: BAY POINT PREFERRED GOLF ASSOCIATION, INC.

Current Principal Place of Business:

128 DRAGON'S CIRCLE
PANAMA CITY BEACH, FL 32411

New Principal Place of Business:

Current Mailing Address:

POB 27157
PANAMA CITY BEACH, FL 32411

New Mailing Address:

P. O. BOX 27157
PANAMA CITY BEACH, FL 32411

FEI Number: 20-4835044 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CONNOR, DON
128 DRAGON'S CIRCLE
PANAMA CITY BEACH, 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:	VCD	( ) Delete
Name:	CONNOR, DON	
Address:	P.O. BOX 27554	
City-St-Zip:	PANAMA CITY BEACH, FL 32411	
Title:	D	( ) Delete
Name:	CHABOT, DON	
Address:	P.O. BOX 27376	
City-St-Zip:	PANAMA CITY BEACH, FL 32411	
Title:	CD	( ) Delete
Name:	WELLDEN, JIM	
Address:	P.O. BOX 28387	
City-St-Zip:	PANAMA CITY BEACH, FL 32411	
Title:	SD	( ) Delete
Name:	AKST, GORDON	
Address:	P.O. BOX 27157	
City-St-Zip:	PANAMA CITY BEACH, FL 32411	
Title:	D	( ) Delete
Name:	FLATT, LOWELL	
Address:	P.O. BOX 27457	
City-St-Zip:	PANAMA CITY BEACH, FL 32411	
Title:	TD	( ) Delete
Name:	SPOCK, RAY	
Address:	POB 27310	
City-St-Zip:	PANAMA CITY, FL 32411	

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:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	TD	(X) Change ( ) Addition
Name:	SPOCK, RAY	
Address:	P. O. BOX 27310	
City-St-Zip:	PANAMA CITY, FL 32411	

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: GORDON AKST SD 02/27/2009
Electronic Signature of Signing Officer or Director — Date