

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25646

FILED
Apr 28, 2006
Secretary of State

Entity Name: BAY POINT CITIZENS ASSOCIATION, INC.

Current Principal Place of Business:

319 PAVONIA ROAD
NOKOMIS, FL 34275 US

New Principal Place of Business:

211 BAYVIEW PKWY
NOKOMIS, FL 34275 US

Current Mailing Address:

P O BOX 629
NOKOMIS, FL 34274 US

New Mailing Address:

FEI Number: 65-0107798 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PARENTE, JOHN
319 PAVONIA ROAD
NOKOMIS, FL 34275 US

Name and Address of New Registered Agent:

VAN BUREN, ELIZABETH P
211 BAYVIEW PKWY
NOKOMIS, FL 34275 US

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: ELIZABETH VAN BUREN

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PARENTE, JOHN
Address: 319 PAVONIA ROAD
City-St-Zip: NOKOMIS, FL 34275

Title: S () Delete
Name: WILLIAMS, SHARON
Address: 404 PINE
City-St-Zip: NOKOMIS, FL 34275

Title: T () Delete
Name: VAN BUREN, ELIZABETH
Address: 211 BAYVIEW PKWY
City-St-Zip: NOKOMIS, FL 34275

Title: VPD () Delete
Name: HANSEN, MARY BETH
Address: 202 GROVE ST.
City-St-Zip: NOKOMIS, FL 34275

Title: D () Delete
Name: BEEBE, MARK
Address: 601 BAY POINT AVE.
City-St-Zip: NOKOMIS, FL 34275

Title: D (X) Delete
Name: HEALY, TERRI
Address: 301 PALM AVE.
City-St-Zip: NOKOMIS, FL 34275

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RICHARDS, COLLEEN
Address: 304 PINE
City-St-Zip: NOKOMIS, FL 34275

Title: D (X) Change () Addition
Name: HEALY, TERRI
Address: 301 PALM AVE.
City-St-Zip: NOKOMIS, FL 34275

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

Title: D (X) Change () Addition
Name: RICHARDS, DAVID
Address: 304 PINE
City-St-Zip: NOKOMIS, FL 34275

Title: D (X) Change () Addition
Name: DUMAS, MARYANNE
Address: 603 BAY POINT AVE.
City-St-Zip: NOKOMIS, FL 34275

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ELIZABETH P. VAN BUREN

T

04/28/2006

Electronic Signature of Signing Officer or Director

Date