

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25646

FILED
Apr 04, 2007
Secretary of State

Entity Name: BAY POINT CITIZENS ASSOCIATION, INC.

Current Principal Place of Business:

211 BAYVIEW PKWY
NOKOMIS, FL 34275 US

New Principal Place of Business:

244 PENSACOLA RD.
VENICE, FL 34285 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:

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

Name and Address of New Registered Agent:

VAN BUREN, ELIZABETH P
244 PENSACOLA RD/
VENICE, FL 34285 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: _____

04/04/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

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

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

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

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

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: VAN BUREN, ELIZABETH
Address: 244 PENSACOLA RD.
City-St-Zip: VENICE, FL 34285

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

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

TREA

04/04/2007

Electronic Signature of Signing Officer or Director

Date