## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N43036

FILED Apr 14, 2010 Secretary of State

Entity Name: BAY POINT VISTA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

5944 N. BAY POINT DR 955 OSPREY COURT PENSACOLA, FL 32507 PENSACOLA, FL 32507

Current Mailing Address: New Mailing Address:

P.O. BOX 34456

PENSACOLA, FL 325074456

FEI Number: 59-3228028 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

KUECK, LYNNE 955 OSPREY COURT PENSACOLA, FL 32507 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.

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Electronic Signature of Registered Agent Date

**OFFICERS AND DIRECTORS:** 

Title: F

SIGNATURE:

Name: KUECK, LYNNE R Address: 955 OSPREY CT City-St-Zip: PENSACOLA, FL 32507

Title: V

 Name:
 ENBODY, DAVID

 Address:
 5917 N. BAY POINT

 City-St-Zip:
 PENSACOLA, FL 32507

Title:

 Name:
 VOGEL, JUDY

 Address:
 5915 BAY VISTA DRIVE

 City-St-Zip:
 PENSACOLA, FL 32507

Title:

 Name:
 MCFARLAND, FRED

 Address:
 5987 WEST BAY POINT DR.

 City-St-Zip:
 PENSACOLA, FL 32507

Title:

 Name:
 BARENDRICK, STEPHANIE

 Address:
 590 1 N BAY POINT

 City-St-Zip:
 PENSACOLA, FL 32507

Title: E

Name: DON, MARINI

Address: 5967 WEST BAY POINT DR City-St-Zip: PENSACOLA, FL 32507

I hereby 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 all other like empowered.

SIGNATURE: L. KUECK PRES 04/14/2010