NONPROFIT CORPORATION ANNUAL REPORT



F LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

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DOCUMENT # 1. Corporation Name N9400003735 (7)

BAYOU POINTE HOMEOWNERS ASSOCIATION, INC.

Principal Place	of Business	Mailing Address			
3830 TAMPA I SUITE 200	RD.	3830 TAMPA RD. SUITE 200	MCD4		
PALM HARBO	nt FL 34004	PALM HARBOR FL 34	1084	3. Date Incorporated or Qualified 07/26/1994	3a. Date of Last Report 02/06/1995
2. Principa! Pla	ice of Business	2a. Mailing Address 26		4. FEI Number 59-3257245	Applied For Not Applicable
Suite, Apt. #	t, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23 Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
<u></u>	Country 25	Z ip 29 :	30	This corporation has liability for in Florida Statutes	itangible tax under s. 199.032,] Yes ፟፟ Yo
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
			81 Name		
BABCOC 3830 TAI	K, CHARLES I III		82 Street Ac	kkress (P.O. Box Number is Not Acceptable	э)
SUITE 20			83	<u> </u>	
	ARBOR FL 34684		84 04		Top 7:- 0-4-
			84 Crty		FL 85 Zip Code
familiar with SIGNATURE	so agent, or both, in the State of Floridi h, and accept the obligations of, Section Signature, typed or printed hairs of registered agent a	on 617.0503, Florida Statute		oard of directors. I hereby accept the appoint	Intment as registered agent. I am
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
THLE	D	DELETE	1 1 TITLE		Change Addition
NAME	BABCOCK, CHARLES I III		1.2 NAME		
STHEEL ADDRESS	3830 TAMPA RD, SUITE 200		1.3 STREET ADDRESS		
CITY - ST - ZIP	PALM HARBOR FL 34684 D	DELETE	14 CITY- ST-ZIP 21 TITLE		Change Addition
NAME	BASS, ROBERT E	Преселе	2 2 NAME		C change C youngi
STREET ADDRESS	3830 TAMPA RD, SUITE 200		23 STREET ADDRESS		
CITY - ST - ZIP	PALM HARBOR FL 34684		2 4 CITY - ST-ZIP		
TITLE	D	DELETE	3 1 TITLE		Change Addition
NAME	BASS, CHRISTINE M		3.2 NAME		
STREET ADORESS	3830 TAMPA RD, SUITE 200 PALM HARBOR FL 34684		3.3 STREET ADDRESS		
CITY - ST - ZIP TITLE	FALM HANDON FL 34004	MOELETE	34 CITY - ST - ZIP 41 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4 4 CITY - ST - ZIP		
TOTLE		□ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME CLOSEL LEDGESCO			5.2 NAME		
STREET ADDRESS			5 3 STHEET ADDRESS		
CITY - ST - ZiP TITLE	VI DATES A / A / A / A / A / A / A / A / A / A / A / A / A	DELETE	5 4 CHY-ST-ZIP 6 1 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CITY - ST - ZIP			6 4 CITY - ST - ZIP		
certify that oath, that I	y certify that the information supplied withe information indicated on this annual arm an officer or director of the corpor Block 12 or Block 13 if changed, or or	ith this filing is voluntally fu al report or supplemental ar ation or the receiver or leusi I) an awachment with an ad	nnual report is true and accu tee empowered to execute	y for the exemption stated in Section 119.0 urate and that my signature shall have the s this report as required by Chapter 617, Floi	17(3)(k), Florida Statutes, I further same legal effect as if made under rida Statutes; and that my name (813)

SIGNATURE:

WILL WALLY PRESIDENT/DIRLETOR.

02/07/76

- I HABAYTAN DIR TANIN BIRKI DARIN BARKI DARIN TARIN DARIK DIRAK KARAFAD DIREK DIREK DARIN

787-5251

Daytime Phone #

CR2E037 (12/95)