FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Aug 01 1996 8:00 am
Secretary of State

DOCUMENT # P9400006753 (5)

1. Corporation Name
BAYPOINT INVESTMENT COMPANY, INC.

Principal Place of Business	Mailing Address
1101 N. LAKE DESTINY DRIVE #400 MAITLAND FL 32751 US	1101 N. LAKE DESTINY DRIVE #400 MAITLAND FL 32751 US

3. Date Incorporated or Qualified: 01/27/1994
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-3334843 [redacted] ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

BIONDO, GERALD J
25 S.E. 2ND AVE.
SUITE 900
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ____________ DATE ______

12. OFFICERS AND DIRECTORS

	12. Officers and Directors	Delete
TITLE	VP	☐ DELETE
NAME	MAGUIRE, JOHN	
STREET ADDRESS	1101 N. LAKE DESTINY DRIVE, STE 400	
CITY-ST-ZIP	MAITLAND FL 32751	
TITLE	P	
NAME	DELGUIDICE, FRED	
STREET ADDRESS	1101 N. LAKE DESTINY DRIVE, STE 400	
CITY-ST-ZIP	MAITLAND FL 32751	
TITLE	VPS	☐ DELETE
NAME	DELGUIDICE, CHRISTOPHER	
STREET ADDRESS	1101 N. LAKE DESTINY DRIVE, STE 400	
CITY-ST-ZIP	MAITLAND FL 32751	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	13. Additions/Changes	Change / Addition
1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	VICE PRESIDENT /SEC.	☒ Change ☐ Addition
2.2 NAME	Fred Del Guidice	
2.3 STREET ADDRESS	1101 N Lake Destiny Dr Suite 400	
2.4 CITY-ST-ZIP	Maitland Fl. 32751	
3.1 TITLE	PRESIDENT	☒ Change ☐ Addition
3.2 NAME	Chris Del Guidice	
3.3 STREET ADDRESS	1101 N Lake Destiny Dr Suite 400	
3.4 CITY-ST-ZIP	Maitland Fl 32751	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	100001910461	☐ Change ☐ Addition
5.2 NAME	-08/01/96--01027--007	
5.3 STREET ADDRESS	***25.00	
5.4 CITY-ST-ZIP		
6.1 TITLE	200001910462	☐ Change ☐ Addition
6.2 NAME	-08/01/96--01027--008	
6.3 STREET ADDRESS	***200.00	
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] 3-18-96 407 660 8666

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)