FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P97000103931 1. Corporation Name

BAY POINT REALTY, INC.

Principal Place of Business 7031 SR 52

Mailing Address

BAYONET POINT FL 34667

7031 SR 52 **BAYONET POINT FL 34667**

Apr 20, 1999 8:00 am Secretary of State

04-20-1999 90140 016 ***150.00



DATUNET POIN	FE 34607	DATORES FORT TE SHOOT			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					12/09/1997			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	T	Appli	ed For
21	 -	26			59-3480633		Not A	pplicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				\$8.	75 Add	ditional
22		27			- 5: Certifcate of Status Desired	F	e Requ	ired
City & State	e ·	City & State			6. Election Campaign Financing	\$5	.00 м	av Be
23		28			Trust Fund Contribution	•	ided to	,
Zip	Country	Zip	Соцг	try	8. This corporation owes the current ye	ear Intangible		·-
24	25	29 30			Personal Property Tax.	X Ye	s [No No
• • •	9. Name and Address of Current		1		10. Name and Address of New Regis	tered Agent		
			1	81 Name				
LUDINGTON, CHARLES								
12939 PEBBLE BEACH CIRCLE				82 Street Address (P.O. Box Number is Not Acceptable)				
BAYONET PT. FL 34667				83				······
			Ī	84 City		85	Zip Co	de
						FL [.,	
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	the ab	ove-named corp	poration submits this statement for the purp- ion's board of directors. I hereby accept the	ose of changi appointment	ng its re as regis	gisterea dered
onice or r	egistered agent, or both, in the State on the state of the familiar with, and accept the obligations.	ions of, Section 607.0505, Florid	a Statu	tes.	ion a bodie of enough a norous accept the			
-	,							
SIGNATURE	Signature, typed or printed name of registered agen	t and title if applicable. (NOTE: Re	egistered .	gent signature require		ATE		
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	PTSD	☐ DELETE	1.1 TIT	.E		□ Ch	ange	☐ Addition
NAME	LUDINGTON, CHARLES		1.2 NA	AE .				
STREET ADDRESS	12939 PEBBLE BEACH CIRCLE		1.3 STF	REET ADDRESS				
CITY-ST-ZIP	BAYONET POINT FL 34667			Y-ST-ZIP				
TITLE	DATONET TOWN TE GROOT	☐ DELETE	2.1 TIT			☐ Ch	ange	Addition
NAME			2,2 NAI	AF				
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CITY-ST-ZIP		☐ DELETE	•	Y-ST-ZIP		Ch	ange	Addition
TITLE			3.1 TIT			٠		
NAME			3.2 NA	l l				
STREET ADDRESS			3.3 STI	REET ADDRESS				
CITY-ST-ZIP			3.4. CI	Y-ST-ZIP				—
TITLE		☐ DELETE	4.1 TIT	E		□c⊦	ange	Addition
NAME			4, 2 NA	ме				
STREET ADDRESS			4.3 STI	REET ADDRESS				
CITY-ST-ZIP	·		4.4 CIT	Y-ST-ZIP				
TITLE		☐ DELETE	5.1 TIT				ange	Addition
NAME			5.2 NA	ντε				
				REET ADDRESS				
STREET ADDRESS				Y-ST-ZIP				
CITY-ST-ZIP		☐ DELETE	6.1 TIT			C	ange	Addition
TITLE			6.2 NA	ŀ				
NAME								
STREET ADDRESS	•			REET ADDRESS				
CITY-ST-ZIP				Y-ST-ZIP	·····			
14 I hereby	certify that the information supplied wit	th this filing does not qualify for the	ne exer	notion stated in	Section 119.07(3)(i), Florida Statutes. I furti	ner certify that	the info	rmation

Indicated on this annual report or supplied with any signal 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, with all other like empowered.