

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008278

Entity Name: BAY POINT RESIDENCES ASSOCIATION, INC.**Current Principal Place of Business:**4050 MARRIOTT DRIVE
PANAMA CITY, FL 32408**Current Mailing Address:**C/O FIRSTSERVICE RESIDENTIAL
185 GRAND BOULEVARD
MIRAMAR BEACH, FL 32550 US**FEI Number:** 20-4778456**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**KAUFFMAN, ROBERT ESQ.
2063 COUNTY HIGHWAY 395
DUNLAP & SHIPMAN, P.A.
SANTA ROSA BEACH, FL 32459 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:** ROBERT KAUFFMAN

01/31/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	TREASURER
Name	TEMPLE, TERRY
Address	185 GRAND BOULEVARD
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	DIRECTOR
Name	STABLER, CARLTON
Address	C/O FIRSTSERVICE RESIDENTIAL 185 GRAND BOULEVARD
City-State-Zip:	MIRAMAR BEACH FL 32550

Title	PRESIDENT
Name	BOURNE, STAN
Address	4050 MARRIOTT DRIVE
City-State-Zip:	PANAMA CITY FL 32408

Title	VP
Name	KRIS, MCMELLON
Address	4050 MARRIOTT DRIVE
City-State-Zip:	PANAMA CITY FL 32408

Title	DIRECTOR
Name	RON, BROWN
Address	4050 MARRIOTT DRIVE
City-State-Zip:	PANAMA CITY FL 32408

Title	CORRESPONDING SECRETARY
Name	FIRSTSERVICE RESIDENTIAL
Address	BAY POINT RESIDENCES 185 GRAND BOULEVARD
City-State-Zip:	MIRAMAR BEACH FL 32550

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: MARTHA ABT

CAM

01/31/2022

Electronic Signature of Signing Officer/Director Detail

Date