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

Feb 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # 403125 (8) BASS RANCH, INC Principal Place of Business Mailing Address 16525 HWY, 98N 16525 HWY, 98N **OKEECHOBEE FL 34972** OKEECHOBEE FL 34972 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/14/1972 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-1404446 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing П 23 28 Trust Fund Contribution Added to Fees Žiρ Žιρ Country Country 8. This corporation owes or has paid the current year Intengible 24 Yes Personal Property Tax due June 30. 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BASS, ELDA MAE 81 Name 16525 HWY 98N Street Address (P.O. Box Number is Not Acceptable) **OKEECHOBEE FL 34972** 83 64 City 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 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change ☐ Addition TITLE 1.1 TITLE BASS, ELWYN NAME 1.2 NAME 16525 HWY 98N 1.3 STREET ADDRESS STREET ADDRESS OKEECHOBEE FL CITY-ST-ZIP 14 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 21 TITLE BASS, ELDA MAE NAME 22 NAME 16525 HWY 98N STREET ADDRESS 2 3 STREET ADDRESS OKEECHOBEE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP VD DELETE Change Addition TITLE 3.1 TITLE **GLENN J. BASS** NAME 3.2 NAME 16525 HWY, 98 NORTH 3.3 STREET ADDRESS STREET ADDRESS OKEECHOBEE FL CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE BASS, J. C. NAME 4 2 NAME 16525 HWY 98N 4.3 STREET ADDRESS STREET ADDRESS OKEECHOBEE FL 4.4 CITY-ST-ZIP CITY-ST-ZIP T] DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-7/P Change Addition DELETE TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 63 STREET ADDRESS CITY-ST-ZIP 64 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 attrichment with an address.

SIGNATURE:

-Elda Macha = (Sec TD February 19198

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