

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 765680

FILED
Jan 09, 2009
Secretary of State

Entity Name: BASS CAPITAL SHRINE CLUB HOLDING CORPORATION

Current Principal Place of Business:

116 SHRINE CLUB ROAD
CRESCENT CITY, FL 32112

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 241
CRESCENT CITY, FL 32112

New Mailing Address:

FEI Number: 59-2201964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROVES, JACK
339 BUFFALO RD
248 PORT COMFORT DR
EAST PALATKA, FL 32131 US

Name and Address of New Registered Agent:

KAUFMAN, ALLAN
302 SPORTSMAN DR.
WELAKA, FL 32193 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: ALLAN KAUFMAN

01/09/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: GROVES, JACK
Address: 248 PORT COMFORT DR
City-St-Zip: EAST PALATKA, FL 32131

Title: P () Delete
Name: PAYNE, HOMER
Address: 302 HORSE LANDING RD
City-St-Zip: SATSUMA, FL 321892242

Title: T () Delete
Name: TANNER, DAVID
Address: PO BOX 506
City-St-Zip: GEORGETOWN, FL 32193

Title: VP () Delete
Name: ROBINSON, BERNARD
Address: PO BOX 363
City-St-Zip: LAKE COMO, FL 32157

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: KAUFMAN, ALLAN
Address: 302 SPORTSMAN DR.
City-St-Zip: WELAKA, FL 32193

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: EBERSOHL, VERNON
Address: 209 BASS TRAIL
City-St-Zip: CRESCENT CITY, FL 32112

Title: VP2 () Change (X) Addition
Name: BUTCHER, FORREST
Address: 161 WALT LANE
City-St-Zip: SATSUMA, FL 32189

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ALLAN KAUFMAN

S

01/09/2009

Electronic Signature of Signing Officer or Director

Date