2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 01, 2006 8:00 am Secretary of State

DOCUMENT # F01000002201 1. Entity Name RICHARD BASS HOMES, INC.						05-01-2006	5 90400 043 **	**150.00	
Principal Plac	e of Business	Mailing Address					•		
103 EGRET CT		PO BOX 778			Δ1	0075721	ง		
CARRABELLE	FL 32322	DOTHAN, AL 36302			7.	,			
					1		INII NEIK NOKE UTIK KENI		
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.			03312006	Chg-P	CR2E034 (1	1/05)	
City & State		City & State			4. FEI Numbe 63-1153			Applied For Not Applicable	
Zip	Country	Zip	Countr	ry	5. Certificate	of Status Desired		5 Additional lequired	
	6. Name and Address of Curre	nt Registered Agent			7. Name and	Address of New	Registered Agent	•	
				Name Bass, Richard					
BASS, RICHARD 103 EGRET CT			-	Street Address (P.O. Box Number is Not Acceptable)					
	LLE, FL 32322			<u> </u>	500 Kind	J Fish 1	lane Uni	<u> + 4180 </u>	
	·				-				
				City Duna	ima City P	reach	FL Z	ip Code	
8. The above	named entity submits this statement	for the purpose of changing its	registere	arreais d office or reais	stered agent, or bot			or with, and accept	
	ions of registered agent.		9						
SIGNATURE.	Signature, typed or printed name of registered ago	ent and title if applicable (NOTE	E: Registered	Agent signature requ	urred when reinstating)		3-31- C	م)(_ه	
	E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550	9. Election Campai Trust Fund Cont			\$5.00 May Be Added to Fees				
10.	OFFICERS AN	ID DIRECTORS	11.		ADDITIONS/	CHANGES TO O	FFICERS AND DIRE	CTORS IN 11	
TITLE	Р	☐ Delete	TITLE					hange Addition	
NAME	BASS, JAMES R		NAME		4500 KM	16 FISH	I ANE UN	IT #180	
STREET ADDRESS CITY-S1-ZIP				I AUDINESS	4500 KING FISH LANE UNIT 4180 DANAMA CITY BEACH, FL 32408				
TITLE	ST ST 32322	□ Delete	TITLE		p	-119 221		hange Addition	
NAME	BASS, ELIZABETH	LI Delete	NAMÉ	ı			_		
STREET ADDRESS	1450 EDDINS RD		STREE	T ADDITION			rd strei	e T	
CITY-ST-ZIP	DOTHAN, AL 36301		CITY-	ST-ZIP T	>OTHAN	AL 363	105		
TITLE		☐ Delete	TITLE	i i				hange	
NAME STREET ADDRESS			NAME	T ADORESS					
CITY-ST-ZIP				ST-ZIP					
TITLE		☐ Delete	TITLE	-			П	hange	
NAME			NAME						
STREET ADDRESS	.			T ADDRESS					
CITY-ST-ZIP			CITY-	ST-ZIP					
TITLE			TITLE					hange 🖺 Addition	
NAME STREET ADDRESS			NAME STREE	T ADDRESS					
CITY-ST-ZIP				ST-ZIP					
FITLE		□ Defete	TITLE					hange Addition	
NAME			NAME						
STREET ADDRESS				T ADDRESS				•	
CITY - ST - ZIP	<u> </u>		CITY-:	ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:	pena	RBan			
		AND TYPED OR PRINTED	NAME OF SIGNI	NG OFFICER OR	DIRECTOR

334. <u>193-2158</u>
Daytime Phone #