## 2011 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000000399

Entity Name: OPERATION BASS, INC.

FILED Apr 26, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

30 GAMBLE LN

BENTON, KY 42025 US

Current Mailing Address: New Mailing Address:

US

8096 EXCELSIOR BOULEVARD HOPKINS, MN 55343 US

FEI Number: 61-0988879 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NRAI SERVICES, INC. 515 E. PARK AVENUE TALLAHASSEE, FL 32301

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:

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

Title: VF

 Name:
 BOAZ, SETH T

 Address:
 30 GAMBLE LN

 City-St-Zip:
 BENTON, KY 42025

Title: PRES

Name: FENNEL, KATHY A Address: 30 GAMBLE LN City-St-Zip: BENTON, KY 42025

Title: PRES

Name: JACOBS, TRISHA L

Address: 8096 EXCELSIOR BOULEVARD

City-St-Zip: HOPKINS, MN 55343

Title: CEO

Name: JACOBS, IRWIN L

Address: 8096 EXCELSIOR BOULEVARD

City-St-Zip: HOPKINS, MN 55343

Title: CFO

Name: MAHLER, DAVID A

Address: 8096 EXCELSIOR BOULEVARD

City-St-Zip: HOPKINS, MN 55343

Title: S

Name: LINDSAY, DANIEL T

Address: 8096 EXCELSIOR BOULEVARD

City-St-Zip: HOPKINS, MN 55343

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DAVID A. MAHLER CFO 04/26/2011