

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K50964

FILED
Apr 30, 2007
Secretary of State

Entity Name: THE BASA CORPORATION

Current Principal Place of Business:

14004 ROOSEVELT BLVD
STE 601A
CLEARWATER, FL 33762 US

New Principal Place of Business:

9442 TREASURE LANE N.E
ST PETERSBURG, FL 33702 US

Current Mailing Address:

14004 ROOSEVELT BLVD
STE 601A
CLEARWATER, FL 33762 US

New Mailing Address:

9442 TREASURE LANE N.E
ST PETERSBURG, FL 33702 US

FEI Number: 59-2956640

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLEN, DON M
14004 ROOSEVELT BLVD
STE 601A
CLEARWATER, FL 33762 US

Name and Address of New Registered Agent:

ALLEN, DON M
9442 TREASURE LANE NE
ST PETERSBURG, FL 33702 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:

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALLEN, DON M.,
Address: 14004 ROOSEVELT BLVD STE 601A
City-St-Zip: CLEARWATER, FL 33762

Title: P () Delete
Name: ALLEN, BRENDA H
Address: 14004 ROOSEVELT BLVD STE 601A
City-St-Zip: CLEARWATER, FL 33762

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ALLEN, DON M.,
Address: 9442 TREASURE LANE NE
City-St-Zip: ST PETERSBURG, FL 33702

Title: P (X) Change () Addition
Name: ALLEN, BRENDA H
Address: 9442 TREASURE LANE NE
City-St-Zip: ST PETERSBURG, FL 33702

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

SIGNATURE: SHARI SWAFFORD

V.P.

04/30/2007

Electronic Signature of Signing Officer or Director

Date