
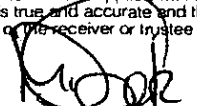


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L05000034496 1. Entity Name BASS LAKE VILLAS, LLC					
Principal Place of Business 2180 EMPEROR DRIVE KISSIMMEE, FL 34744			Mailing Address 2180 EMPEROR DRIVE KISSIMMEE, FL 34744		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-1251205	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent LEATHER, DAVID 2180 EMPEROR DRIVE KISSIMMEE, FL 34744				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COOK, MARTIN D FARRIERS CHARLTON PELSEY WILTSHIRE, UK sn96eu <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	FARRIERS, CHARLTON, PEWSEY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BOOTY, ALAN R 1874 GROVE UPHINSTER ESSEX, UK rh142er <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	18THE GROVE, UPMINSTER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM COOK, WENDY FARRIERS CHARLTON PELSEY WILTSHIRE, UK sn96eu <input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	FARRIERS, CHARLTON, PEWSEY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE:  MARTIN D COOK (44) 1880 - JANUARY 18, 2007 630650					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date: Daytime Phone #:					

60010096



01182007 Chg-LLC CR2E083 (12/06)