

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098462

Entity Name: BAS WORKS, LLC

FILED
Jan 04, 2007
Secretary of State

Current Principal Place of Business:

4701 PETAL PAWPAW LANE
SAINT CLOUD, FL 34772

New Principal Place of Business:

4701 PETAL PAWPAW LANE
SAINT CLOUD, FL 34772

Current Mailing Address:

4701 PETAL PAWPAW LANE
SAINT CLOUD, FL 34772

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WILLIAMS, MATTHEW J
4701 PETAL PAWPAW LANE
SAINT CLOUD, FL 34772 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: WILLIAMS, MATTHEW J
Address: 4701 PETAL PAWPAW LANE
City-St-Zip: SAINT CLOUD, FL 34772

Title: MGRM () Delete
Name: WILLIAMS, SANDRA I
Address: 4701 PETAL PAWPAW LANE
City-St-Zip: SAINT CLOUD, FL 34772

ADDITIONS/CHANGES:

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: MATTHEW J. WILLIAMS

MGRM

01/04/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date