## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# L81551

Title:

FILED May 05, 2004 Secretary of State

Entity Name: BASS ROCKS CONSTRUCTION CORP.	
Current Principal Place of Business:	New Principal Place of Business:
591 TUCKERMAN AVE MIDDLETOWN, RI 02842 US	
Current Mailing Address:	New Mailing Address:
P O BOX 4548 MIDDLETOWN, RI 02842 US	
FEI Number: 65-0239646 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:
CORPORATION SERVICES COMPNAY 1201 HAYS ST TALLAHASSEE, FL 32301 US	
The above named entity submits this statement for the pur in the State of Florida.	rpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registered Agent	t Date
Election Campaign Financing Trust Fund Contribution ( ).	
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: PD ( ) Delete	Title: PD (X) Change ( ) Addition

Name: LANG, PATRICIA, Name: LANG, PATRICIA C MS 1413 SOUTH STREET Address: 1413 SOUTH STREET Address: City-St-Zip: KEY WEST, FL City-St-Zip: KEY WEST, FL 33040 US Title: () Delete Title: (X) Change ( ) Addition LANG. SANDRA. LANG. SANDRA C MRS. Name: Name: Address: Address: 553 TUCKERMAN AVE 553 TUCKERMAN AVE MIDDLETOWN, RI 02842 MIDDLETOWN, RI 02842 US City-St-Zip: City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition Name: O'REGAN, JEFFREY Name: O'REGAN, JEFFREY PMR. Address 1413 S SOUTH STREET Address: 1413 S SOUTH STREET City-St-Zip: KEY WEST, FL 33040 City-St-Zip: KEY WEST, FL 33040 US

( ) Delete Title: VP ( ) Change (X) Addition

Name: Name: LANG, PETER J MR.
Address: Address: 194 EAST MAIN ROAD

City-St-Zip: City-St-Zip: LITTLE COMPTON, RI 02837 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: PATRICIA LANG PD 05/05/2004