

**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 26, 2007 8:00 am
Secretary of State

04-26-2007 90189 001 ****61.25

DOCUMENT # N17698

1. Entity Name

OLD SPRINGHILL/BASS CEMETERY, INC.



Principal Place of Business

4854 SAN MIGUEL
MILTON, FL 32583-5601 US

Mailing Address

4940 SAN MIGUEL
MILTON, FL 32583-5601 US

DO NOT WRITE IN THIS SPACE



01152007 No Chg-NP

CR2E037 (4/06)

4. FEI Number

59-2729024

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BASS, WILLIAM H.
4940 SAN MIGUEL
MILTON, FL 32583

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VD
NAME	TOMPKINS, H.B.
STREET ADDRESS	90 GRANT STREET
CITY-ST-ZIP	MOBILE, AL
TITLE	PD
NAME	BASS, WILLIAM H.
STREET ADDRESS	4940 SAN MIGUEL
CITY-ST-ZIP	MILTON, FL 32583
TITLE	TD
NAME	BASS, WILLIAM E
STREET ADDRESS	4940 SAN MIGUEL
CITY-ST-ZIP	MILTON, FL 32583
TITLE	SD
NAME	BASS, STEPHEN L
STREET ADDRESS	4233 SEAPORT RD.
CITY-ST-ZIP	PACE, FL
TITLE	VD
NAME	RANDALL E. BASS
STREET ADDRESS	4940 SAN MIGUEL MILTON, FL 32583
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

WILLIAM H. BASS

Date

5/23/07

Daytime Phone #