2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

FILED DOCUMENT # N28153 Apr 27, 2006 08:00 AN Secretary of State 1. Entity Name BASS BRANCH HUNTING CLUB, INC. Principal Place of Business Mailing Address C/O KENNETH A. BORN, JR. C/O KENNETH A. BORN, JR. 6951 SPRINGHILL RD 6951 SPRINGHILL RD MILTON FL 32570 MILTON FL 32570 US 2. Principal Place of Business 3. Mailing Address Suite, Apt #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) Applied For City & State City & State 4. FEI Number 59-2951620 Not Applicable Country \$8.75 Additional Zio Country Zro 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BORN, KENNETH A. JR. Street Address (P.O. Box Number is Not Acceptable) 6951 SPRINGHILL RD MILTON FL 32570 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 DATE (NOTE: Registered Agent signature required when reinstablig) Signature, typed or printed name of registered agent and title if applicable FILE NOW: FEE IS \$61.25 9. Election Campaion Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2006 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Addition ☐ Change BILL TITLE Defete BORN, KENNETH A. JR. NAME NAME RT. 6 BOX 270D STREET ADDRESS STREET ADDRESS MILTON FL CITY-ST-ZIP OTY-SI-ZIP U00000538438 Change ☐ Addition ٧n Delete TITLE TITLE LOHR, DARWIN E. NAME ns/ng/06-80058-012 70.00 RT. 6 BOX 270C STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MILTON FL CITY-ST-ZIP ☐ Change ☐ Addition STD ☐ Delete TITLE TITLE BORN, PATRICIA L. NAME NAME STREET ADDRESS RT. 6 BOX 270D STREET ADDRESS CITY - ST - 7IP CITY - ST - 7IP **GULF BREEZE FL** ☐ Dolete TITLE Change ☐ Addition TITLE LOHR, TOM NAME NAME STREET ADDRESS STREET ADDRESS 203 SHORELINE DRIVE CITY-ST-ZIP CITY-ST-2IP MILTON FL ☐ Change ☐ Addition THE ☐ Defete BAILEY, TODD NAME 7151 PINE BLOSSOM DR STREET ADDRESS STREET ADDRESS MILTON FL 32570 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE TITLE NAME MAME STREET ADDRESS STREET ADDRESS CHY-SI-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained in Section 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