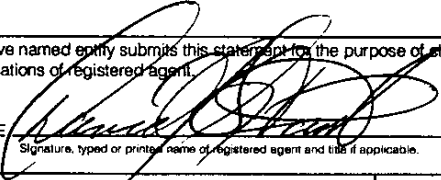
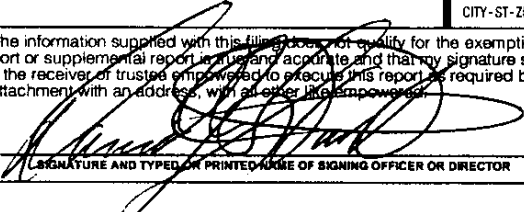


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 14, 2007 8:00 am**  
**Secretary of State**

02-14-2007 90051 007 \*\*\*\*61.25

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |                                                                          |                                                                                     |                                                                                                                                                                                                          |                                                                                   |                                                                              |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # N43034</b><br>1. Entity Name<br><b>THE TAYLOR CREEK BASS CLUB, INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                          |                                                                                     |                                                                                                                                                                                                          |  |                                                                              |
| Principal Place of Business<br><b>P.O. BOX 3179<br/>OKEECHOBEE, FL 34973</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          |                                                                                     | Mailing Address<br><b>P.O. BOX 3179<br/>OKEECHOBEE, FL 34973</b>                                                                                                                                         |                                                                                   |                                                                              |
| 2. Principal Place of Business - No P.O. Box #                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                          | 3. Mailing Address                                                                  |                                                                                                                                                                                                          |                                                                                   |                                                                              |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          | Suite, Apt. #, etc.                                                                 |                                                                                                                                                                                                          |                                                                                   |                                                                              |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          | City & State                                                                        |                                                                                                                                                                                                          |                                                                                   |                                                                              |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | Country                                                                  | Zip                                                                                 | Country                                                                                                                                                                                                  | 01092007 Chg-NP CR2E037 (12/06)                                                   |                                                                              |
| 4. FEI Number<br><b>65-0274698</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                          |                                                                                     |                                                                                                                                                                                                          | Applied For<br><input type="checkbox"/> Not Applicable                            |                                                                              |
| 5. Certificate of Status Desired <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                          |                                                                                     |                                                                                                                                                                                                          | <b>\$8.75 Additional Fee Required</b>                                             |                                                                              |
| 6. Name and Address of Current Registered Agent<br><br><b>JOHNSON, ERNIE<br/>4013 SW 13TH WAY<br/>OKEECHOBEE, FL 34974</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                          |                                                                                     | 7. Name and Address of New Registered Agent<br>Name <b>David J. Stout</b><br>Street Address (P.O. Box Number is Not Acceptable)<br><b>814 S.E. 25th Street</b><br>City <b>Okeechobee</b> FL <b>34974</b> |                                                                                   |                                                                              |
| 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.<br><br>SIGNATURE  (NOTE: Registered Agent signature required when reinstating) DATE                                                                                                                                                                                                                                         |                                                                          |                                                                                     |                                                                                                                                                                                                          |                                                                                   |                                                                              |
| <b>Filing Fee is \$61.25<br/>Due by May 1, 2007</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                                                                          | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |                                                                                                                                                                                                          | <b>\$5.00 May Be Added to Fees</b>                                                |                                                                              |
| <b>Make check payable to<br/>Florida Department of State</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                          |                                                                                     |                                                                                                                                                                                                          |                                                                                   |                                                                              |
| <b>10. OFFICERS AND DIRECTORS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                          |                                                                                     | <b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>                                                                                                                                             |                                                                                   |                                                                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | P<br>OWENS, BOB<br>13825 SE 34TH ST<br>OKEECHOBEE, FL 34974              | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                       | President<br>Chan Garrett<br>2165 S.E. 9th Ave.<br>Okeechobee, FL 34974           | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | VP<br>HEAD, CARROLL<br>2252 SW 22ND CIR<br>OKEECHOBEE, FL 34974          | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                       | Vice President<br>Michael Zubricky<br>13400 Hwy. 441 S.E.<br>Okeechobee, FL 34974 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | T<br>HARLOW, JOHN F<br>13344 SW 16TH DR.<br>OKEECHOBEE, FL 34974         | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                       | Treasurer<br>James Delk<br>2251 S.E. 25th St.<br>Okeechobee, FL 34974             | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | S<br>JOHNSON, ERNIE<br>4013 SW 13TH WAY<br>OKEECHOBEE, FL 34974          | <input checked="" type="checkbox"/> Delete                                          | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                       | Secretary<br>David J. Stout<br>814 S.E. 25th St.<br>Okeechobee, FL 34974          | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          | TD<br>MARSHALL, GEORGE JR<br>3411 SE 25TH STREET<br>OKEECHOBEE, FL 34974 | <input type="checkbox"/> Delete                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                       |                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                          | <input type="checkbox"/> Delete                                                     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                       |                                                                                   | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 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 an other like empowered. |                                                                          |                                                                                     |                                                                                                                                                                                                          |                                                                                   |                                                                              |
| SIGNATURE:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                          |                                                                                     | 4/15/07 863-467-2256                                                                                                                                                                                     |                                                                                   |                                                                              |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                          |                                                                                     | Date Daytime Phone #                                                                                                                                                                                     |                                                                                   |                                                                              |