

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005391

FILED
Jan 26, 2009
Secretary of State

Entity Name: FLORIDA BASS FEDERATION, INC.

Current Principal Place of Business:

% W. COLE MOORMAN, CPA
2800 S.W. 3RD TERRACE, STE. C
OKEECHOBEE, FL 34974

Current Mailing Address:

% W. COLE MOORMAN, CPA
2800 S.W. 3RD TERRACE, STE. C
OKEECHOBEE, FL 34974

New Principal Place of Business:

LEDYARD AND LEDYARD, CPA'S
9515 SUNSHINE BLVD.
NEW PORT RICHEY, FL 34654

New Mailing Address:

LEDYARD AND LEDYARD, CPA'S
9515 SUNSHINE BLVD.
NEW PORT RICHEY, FL 34654

FEI Number: 26-6568316

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MOORMAN, W. COLE CPA
2800 S.W. 3RD TERRACE, STE. C
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

LEDYARD, MERLYN CPA
9515 SUNSHINE BLVD.
NEW PORT RICHEY, FL 34654 US

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: MERLYN LEDYARD

01/26/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: KOSTRZEWA, ROBERT
Address: 6840-B COMMERCE AVE
City-St-Zip: PORT RICHEY, FL 34668

Title: VP () Delete
Name: FOWLER, JAMES
Address: 125 FISHERMAN ROAD
City-St-Zip: SATSUMA, FL 32189

Title: SECT () Delete
Name: ANNIN, HEATH
Address: 1047 EPPING FOREST DR.
City-St-Zip: TALLAHASSEE, FL 32317

Title: TD () Delete
Name: GARY, DOUGLAS
Address: 5315 LORI LANE
City-St-Zip: LAKE LAND, FL 33801

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: FOWLER, JAMES
Address: 125 FISHERMAN RD.
City-St-Zip: SATSUMA, FL 32189

Title: VP (X) Change () Addition
Name: WETZ, JEFF
Address: 3365 OAK HILL RD.
City-St-Zip: MOUNT DORA, FL 32757

Title: SECT (X) Change () Addition
Name: JOSEPH, NICKOL
Address: 102 BROWN'S FISH CAMP RD.
City-St-Zip: CRESCENT CITY, FL 32112

Title: TD (X) Change () Addition
Name: CHERYL, BREWER
Address: 305 4TH STREET SOUTH
City-St-Zip: DUNDEE, FL 33838

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES FOWLER

PRES

01/26/2009

Electronic Signature of Signing Officer or Director

Date