


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 31, 2008 08:00 AM
Secretary of State


DOCUMENT # P00000011678 1. Entity Name BASS FAMILY COMPANY, INC.	
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Principal Place of Business 16525 HIGHWAY 98N OKEECHOBEE, FL 34972	Mailing Address 16525 HIGHWAY 98N OKEECHOBEE, FL 34972
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DO NOT WRITE IN THIS SPACE



01282008 No Chg-P CR2E034 (11/05)

4. FEI Number 65-1001840	Applied For Not Applicable
5. Certificate of Status Desired	 \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BASS, ELDA MAE
16525 HIGHWAY 98N
OKEECHOBEE, FL 34972

**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

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U00000809186 02/08/08-80012-005 158.75
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DST BASS, ELDA MAE 16525 HIGHWAY 98N OKEECHOBEE, FL 34972
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BASS, ELWYN 16525 HIGHWAY 98N OKEECHOBEE, FL 34972
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV BASS, GLENN J 16525 HIGHWAY 98N OKEECHOBEE, FL 34972
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP BASS, J C 16525 HIGHWAY 98N OKEECHOBEE, FL 34972
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

**DO NOT WRITE
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 607, 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: Elda Mae Bass Elda Mae Bass 1-28-08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #