

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000117907

FILED
Jan 05, 2007
Secretary of State

Entity Name: BATES FINANCIAL SERVICES, INC.

Current Principal Place of Business:

27 HARBOUR ISLE DR WEST
UNIT 101
HUTCHINSON ISLAND, FL 34949

New Principal Place of Business:

Current Mailing Address:

27 HARBOUR ISLE DR WEST
UNIT 101
HUTCHINSON ISLAND, FL 34949

New Mailing Address:

FEI Number: 22-3849103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BATES, HENRY M JR.
27 HARBOUR ISLE DR WEST
UNIT 101
HUTCHINSON ISLAND, FL 34949 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: BATES, HENRY M
Address: 27 HARBOUR ISLE DR WEST
City-St-Zip: HUTCHINSON ISLAND, FL 34949

Title: VP () Delete
Name: BATES, CAROLYN C
Address: 27 HARBOUR ISLE DR WEST UNIT 101
City-St-Zip: HUTCHINSON ISLAND, FL 34949

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HENRY M BATES

PRES

01/05/2007

Electronic Signature of Signing Officer or Director

Date