## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000025434

Entity Name: BASS BROS. DRYWALL, INC.

FILED Mar 24, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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6925 NE 5TH PLACE OCALA, FL 34470

Current Mailing Address: New Mailing Address:

10117 US 441 10117 S HWY 441 STE 7 STE 7 BELLEVIEW, FL 34420 BELLEVIEW, FL 34420

FEI Number: 48-1306941 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

 SAUNDERS, CATHERINE C
 SAUNDERS, CATHERINE C

 10117 US 441
 10117 S HWY 441

 STE 7
 STE 7

 BELLEVIEW, FL 34420 US
 BELLEVIEW, FL 34420 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: CATHERINE C. SAUNDERS 03/24/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PR ( ) Delete Title: ( ) Change ( ) Addition Name: BASS, MARK S Name:

 Address:
 6925 NE 5TH PLACE
 Address:

 City-St-Zip:
 OCALA, FL 34470
 City-St-Zip:

Title: VΡ Title: () Delete (X) Change ( ) Addition Name: BASS, MARK S Name: BASS, MARK S JR 6925 NE 5TH PLACE 6925 NE 5TH PLACE Address: Address: OCALA, FL 34470 OCALA, FL 34470 City-St-Zip: City-St-Zip:

Title: SE () Delete Title: SE (X) Change () Addition Name: SAUNDERS, CATHERINE C Name: SAUNDERS, CATHERINE C

 Address:
 10117 US 441
 Address:
 10117 SE HWY 441

 City-St-Zip:
 BELLEVIEW, FL 34420
 City-St-Zip:
 BELLEVIEW, FL 34420

Title: ( ) Delete Title: DR ( ) Change (X) Addition

 Name:
 Name:
 DARTON, CHAS M

 Address:
 Address:
 6925 NE 5TH PLACE

 City-St-Zip:
 City-St-Zip:
 OCALA, FL 34470

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARK S. BASS PR 03/24/2005