

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000147833

FILED
Apr 27, 2006
Secretary of State

Entity Name: BASS CHAMPIONS SENIOR TOUR, INC

Current Principal Place of Business:

727 S.E. 34TH AVE
OCALA, FL 34471

New Principal Place of Business:

1754 N. E. 12TH
OCALA, FL 34470

Current Mailing Address:

P. O. BOX 1653
OCALA, FL 344781653

New Mailing Address:

FEI Number: 26-0075849 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

UNDERWOOD, FOY C
4455 S. E. 36TH AVE
OCALA, FL 344807353 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: P () Delete
Name: SIMMS, DAVID H
Address: 727 S. E. 34TH AVE
City-St-Zip: OCALA, FL 34471

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SIMMS, DAVID H
Address: 1754 N. E. 12TH AVE
City-St-Zip: OCALA, FL 34470

Title: VP () Change (X) Addition
Name: UNDERWOOD, FOY C
Address: 4455 S. E. 36TH AVE
City-St-Zip: OCALA, FL 344807353

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: FOY C. UNDERWOOD

VP

04/27/2006

Electronic Signature of Signing Officer or Director

_____ Date