

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 17, 2006 8:00 am
Secretary of State

04-17-2006 90340 011 ***150.00

DOCUMENT # P03000150899

1. Entity Name
STEVE BASS ELECTRIC, INC



Principal Place of Business *2369 CLUBHOUSE DR*
6531 LAKE CLARKE DRIVE
LAKE CLARKE SHORES, FL 33406 US

Mailing Address *2369 CLUBHOUSE DR*
6531 LAKE CLARKE DRIVE
LAKE CLARKE SHORES, FL 33406 US *WEST PALM BEACH FL 33409*



01112006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
83-0379767

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BASS, STEVE C
6531 LAKE CLARKE DRIVE
LAKE CLARKE SHORES, FL 33406
2369 CLUBHOUSE DR
WEST PALM BEACH FL
33409

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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, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	BASS, STEVE C
STREET ADDRESS	6531 LAKE CLARKE DRIVE <i>2369 CLUBHOUSE DR</i>
CITY - ST - ZIP	LAKE CLARKE SHORE, FL 33406 <i>WEST PALM BEACH</i> <i>33409</i>
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4.7.06 *561-308-3023*