2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # P95000090311 1. Entity Name BIG BASS VILLAGE AND CAMPGROUNDS, INC.						Feb 04, 2004 Secretary o	08:00 AM of State	
Principal Place of Business Mailing Address					·			
10530 SE 201 ST INGLIS FL 34449			10530 SE 201 ST INGLIS FL 34449					
2. Principal Place of Business			3. Mailing Address					
Suite, Apt. #, etc.			Suite, Apt #, etc.			MOORE CR2E034	(11/03)	
City & State			City & State			4. FEI Number 59-3350294	Applied For Not Applicable	
Zip			Zip Country		itry	5. Certificate of Status Desired \$8.75 Additional Fee Required		
Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent Name			
	ININGS, L 30 SE 20	AWRENCE W JR			Street Address (P.O. Box Number is Not Acceptable)			
INGLIS FL 34449								
					City	FL Zip Code		
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 printing frage of registered agenty and use if applicable (NOTE. Registered Agent signature required when rollistating) April April								
EU E MOMINI FER IS \$150.00								
After May 1, 2004 Fee will be \$550.00 Make Check Payable to Florida Department of State						9. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS				11.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 11	
TITLE	P	LAMPENCE W. ID	Delete	TITL			Change Addition	
NAME STREET ADDRESS CITY-ST-ZIP				STRE	EET ADDRESS ST-ZIP	00 400 700 700 000 450 00		
MILE	ST		☐ Delete	TITL	£		☐ Change ☐ Addition	
NAME STREET ADDRESS	JENNINGS, WENDY SS 10530 SE 201 ST			MAM	TET ADDRESS			
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CITY-ST-ZIP					/·ST-ZIP		2	
12. I hereby certify that the information supplied with this filing does not qualify 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 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.								

FILED

SIGNATURE: Worder and WENDY JENNINGS 2/2/04 352-447-3474
SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #