

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 15, 1999 8:00 am  
Secretary of State

04-15-1999 90027 020 \*\*\*155.00

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1. Corporation Name

BASS'S FURNITURE & APPLIANCE WAREHOUSE, INC.



Principal Place of Business

303 N.W. HATLEY STREET  
JASPER FL 32052

Mailing Address

PO BOX 327  
JASPER FL 32052  
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/02/1996

4. FEI Number

59-3368322

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☒

\$5.00 May Be  
Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PARALEGAL & ATTORNEY SERVICE BUREAU, INC.  
1406 HAYS STREET  
SUITE 2  
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE  
NAME BASS, CAROLYN LOUISE  
STREET ADDRESS 702 S.E. 2ND STREET  
CITY-ST-ZIP JASPER FL 32052

TITLE VD ☐ DELETE  
NAME BASS, JOHN J  
STREET ADDRESS ROUTE 2 BOX 157  
CITY-ST-ZIP JASPER FL 32052

TITLE STD ☐ DELETE  
NAME EATMON, ACENITH CAROLY  
STREET ADDRESS ROUTE 2 BOX 107  
CITY-ST-ZIP JASPER FL 32052

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition  
1.2 NAME Bass, Carolyn Louise  
1.3 STREET ADDRESS 705 SE 2ND AVE  
1.4 CITY-ST-ZIP Jasper FL 32052

2.1 TITLE VD ☒ Change ☐ Addition  
2.2 NAME Bass Jr., John J  
2.3 STREET ADDRESS 3812 NW US Hwy 129  
2.4 CITY-ST-ZIP Jasper, FL 32052

3.1 TITLE STD ☒ Change ☐ Addition  
3.2 NAME Eatmon, Acenith Carolyn  
3.3 STREET ADDRESS 705 SE 2ND AVE  
3.4 CITY-ST-ZIP Jasper, FL 32052

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Acenith C Eatmon  
Acenith C Eatmon

4-6-99

Date

904/792-2725

Daytime Phone #

CR2E034 (11/98)