2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P98000066740

Entity Name: BASS INSURANCE SERVICES, INC.

FILED Mar 21, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
	EXANDER ST TY, FL 33566				
Current Mailing Address:			New Mailing Address:		
	EXANDER ST TY, FL 33566				
FEI Number:	: 59-3524421	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
BASS, JAN 2217 BOG DOVER, F	AERT ROAD				
	named entity s e of Florida.	ubmits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	RE:				
Electronic Signature of Registered Agent			ent	Date	
•	_	satisfy its Intangible Tax filing red Trust Fund Contribution().	quirement and elects to do so (X).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PSTD () BASS, JAMES D 316 N ALEXAND PLANT CITY, FL	ER ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () BASS, JANE E 2217 BOGAERT DOVER, FL 335		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: JAMES D. BASS PRES 03/21/2002