## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# S01766

FILED Apr 30, 2007 Secretary of State

Entity Name: DALE BASSETT INSURANCE AGENCY, INC.

Current Principal Place of Business:			New Principal Place of Business:	
	WINNOTT RO. RNE, FL 32640			
Current Mailing Address:			New Mailing Address:	
	WINNOTT RO. RNE, FL 32640			
FEI Number:	59-3035576	FEI Number Applied For ( ) FEI N	umber Not Applicable()	Certificate of Status Desired ( )
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:
166 LAKE	DAVID D SR WINNOTT RD RNE, FL 32640	) US		
	named entity s e of Florida.	ubmits this statement for the purpose	of changing its registere	ed office or registered agent, or both,
SIGNATUF	RE:			
		c Signature of Registered Agent		Date
Election Car	npaign Financing	Trust Fund Contribution ( ).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PTD () BASSETT, DAVI 166 LAKE WINN HAWTHORNE, I	IOTT LAKE	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition
T:41		Delete THA C SR	Title:	( ) Change ( ) Addition
Title: Name: Address: City-St-Zip:	BASSETT, MAR 166 LAKE WINN HAWTHORNE, F	IOTT RD	Name: Address: City-St-Zip:	
Name: Address:	166 LAKE WINN HAWTHORNE, F	IOTT RD FL 32640 Delete D D JR. AK LANE	Address:	( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify 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: DAVID DALE BASSETT, SR. PTD 04/30/2007