


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 24, 2008 08:00 AM**  
**Secretary of State**

DOCUMENT # 219251 1. Entity Name BASSETT BROTHERS, INC.	
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Principal Place of Business 4991 GLEN CASTLE DRIVE TALLAHASSEE, FL 32309	Mailing Address PO BOX 561 MONTICELLO, FL 32345
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**DO NOT WRITE IN THIS SPACE**

03252008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-6078501	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

BASSETT, W W III  
 4991 GLEN CASTLE DRIVE  
 TALLAHASSEE, FL 32309

**DO NOT WRITE 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD TRAWICK, LUCY B 324 N SUNSET CIR GULF BREEZE, FL 32561
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CSAR, MARY B 801 SW 16TH ST BOCA RATON, FL 33486
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GOSSELIN, CAROLYN B 1402 SOVEREIGN COURT ORLANDO, FL 32804
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BASSETT, WILMER W. III 4991 GLEN CASTLE DRIVE TALLAHASSEE, FL 32309
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/14/08-80010-005 150.00

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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: Wilmer W. Bassett Date: 4-22-08  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #