


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007 08:00 AM
Secretary of State

DOCUMENT # 742156

1. Entity Name
BIG BEND TRANSIT, INC.



Principal Place of Business
**2201 EISENHOWER ST.
 TALLAHASSEE, FL 32310 US**

Mailing Address
**PO BOX 1721
 TALLAHASSEE, FL 32302**

DO NOT WRITE IN THIS SPACE



03152007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1909296	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WATERS, EDWARD B
 2201 EISENHOWER ST.
 TALLAHASSEE, FL 32301**

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

**Filing Fee is \$61.25
 Due by May 1, 2007**

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

000000701614
 04/20/07-80065-001 70.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PERSONS, LEWIS SR. 4595 BARCLAY LN TALLAHASSEE, FL 32308
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD WILSON, RALPH PO BOX 1493 TALLAHASSEE, FL 32302
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PLUMER, LEE E 8782 GAMBLE RD MONTICELLO, FL 32344
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GLASS, ANNE 715 LEWIS BLVD TALLAHASSEE, FL 32311
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEWSOME, BLYTHE 1304 LEEWOOD DR TALLAHASSEE, FL 32312
TITLE NAME STREET ADDRESS CITY-ST-ZIP	M WATERS, EDWARD B. 1314 LEEWOOD DR. TALLAHASSEE, FL 32312

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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 617, 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: Edward B. Waters **04/10/07** **850.574.6266**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone #