


2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 29, 2008 8:00 am
Secretary of State

01-29-2008 90018 026 ***150.00

DOCUMENT # F97000005740
 1. Entity Name
BUNTING EQUIPMENT COMPANY, INC.



Principal Place of Business Mailing Address
 P.O. BOX 4414 P.O. BOX 4414
 ASHEBORO NC 27204-4414 ASHEBORO NC 27204-4414



2. Principal Place of Business - No P.O. Box # 3. Mailing Address
 Suite, Apt. #, etc. State, Apt. #, etc.

1st MOORE CR2E034 (10/07)

City & State City & State

4. FEI Number **56-1793599** Applied For
 Not Applicable

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
HARDWICK III, KELLY B
341 W DAVIDSON ST., STE 301
BARTOW FL 33830

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 date filed. (Print date.) (NOTE: Registered Agent signature required when transferring)

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee Will Be \$350.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE	PCD	<input checked="" type="checkbox"/> Delete
NAME	BUNTING, LARRY L	
STREET ADDRESS	311 ENGLEWOOD DRIVE	DECEASED
CITY-ST-ZIP	ASHEBORO NC	1-11-07
TITLE	VD	<input type="checkbox"/> Delete
NAME	BUNTING, GREGG L	
STREET ADDRESS	311 ENGLEWOOD DRIVE	(CHANGE)
CITY-ST-ZIP	ASHEBORO NC	
TITLE	STD	<input type="checkbox"/> Delete
NAME	BUNTING, BETTY P	
STREET ADDRESS	311 ENGLEWOOD DRIVE	(SAME)
CITY-ST-ZIP	ASHEBORO NC	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GREGG L. BUNTING	
STREET ADDRESS	2923 WOODHAVEN DR.	
CITY-ST-ZIP	ASHEBORO, NC 27205	
TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	JERRY D. BUNTING	
STREET ADDRESS	1694 INDEPENDENCE AVE.	
CITY-ST-ZIP	ASHEBORO, NC 27205	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 empowerments.

SIGNATURE: *Betty Bunting* - **BETTY BUNTING** / SEC. / TREAS. - 1-21-08 336-626-7300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #