

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J58810

FILED  
Apr 25, 2007  
Secretary of State

Entity Name: BONUS TRANSPORTATION, INC.

**Current Principal Place of Business:**

135 S HERMIT SMITH RD  
P. O. BOX 1613  
PLYMOUTH, FL 32768 US

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 169  
SORRENTO, FL 32776 US

**New Mailing Address:**

FEI Number: 59-2833094

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOUGHAN, DONALD LEE  
135 HERMIT SMITH ROAD  
PLYMOUTH, FL 32768 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: BOUGHAN, DONALD L  
Address: 404 E WELCH RD  
City-St-Zip: APOPKA, FL 32703

Title: V ( ) Delete  
Name: BOUGHAN, WILLIAM C  
Address: 1949 DEERVIEW PLACE  
City-St-Zip: LONGWOOD, FL 32750

Title: ST ( ) Delete  
Name: BOUGHAN, MARILYN S  
Address: 30225 RAINEY ROAD  
City-St-Zip: SORRENTO, FL 32776

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: WILLIAM BOUGHAN

V

04/25/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date