2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005410

Entity Name: BONSAL AMERICAN, INC.

FILED Mar 23, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:			
	WRIDGE BOU E, NC 28224					
Current Mailing Address:			New Mailing Address:			
8201 ARROWRIDGE BOULEVARD CHARLOTTE, NC 28224 US						
FEI Number: 58-2652780 FEI Number Applied For () FEI Number		mber Not Applicable () Certificate of Status Desired ()				
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:			
CT CORPORATION SYSTEM C/O CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US						
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:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Address:	HAAS, KEITH A D	OGE BOULEVARD	Title: Name: Address: City-St-Zip:	(() Change () Addition	1
Title: Name: Address: City-St-Zip:	SECO, GIL CFO	DGE BOULEVARD	Title: Name: Address: City-St-Zip:	SECO, GIL C	VRIDGE BOULEVARD	n
Title: Name: Address: City-St-Zip:	HICKMAN, GARY	OGE BOULEVARD	Title: Name: Address: City-St-Zip:	VALENTINE, I	VRIDGE BOULEVARD	n
Title: Name: Address: City-St-Zip:	SEC () E VALENTINE, PAU 8201 ARROWRIE CHARLOTTE, NO	IL R SEC DGE BOULEVARD	Title: Name: Address: City-St-Zip:	MASKE, DAVI	VRIDGE BOULEVARD	n
Title: Name: Address: City-St-Zip:	MASKE, DAVID J	OGE BOULEVARD	Title: Name: Address: City-St-Zip:	(() Change () Addition	1
Title: Name: Address: City-St-Zip:	SANDBROOK, W	DGE BOULEVARD	Title: Name: Address: City-St-Zip:	(()Change ()Addition	n

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: MANDELINE HENDRICKS POA 03/23/2009