

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000005410

Entity Name: BONSAI AMERICAN, INC.

FILED
Apr 11, 2011
Secretary of State

Current Principal Place of Business:

8201 ARROWRIDGE BOULEVARD
CHARLOTTE, NC 28224 US

New Principal Place of Business:

Current Mailing Address:

8201 ARROWRIDGE BOULEVARD
CHARLOTTE, NC 28224 US

New Mailing Address:

FEI Number: 58-2652780

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND RD.
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: PD
Name: MASKE, J. DAVID
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350 US

Title: SEC
Name: SCHAEFFER, MICHAEL
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350 US

Title: VPCF
Name: SECO, GIL
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350 US

Title: AS
Name: HICKMAN, GARY P
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350 US

Title: DIR
Name: HAAS, KEITH A
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350 US

Title: VP
Name: ASHTON, BILL
Address: 375 NORTHRIDGE ROAD, SUITE 350
City-St-Zip: ATLANTA, GA 30350 US

I hereby 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 all other like empowered.

SIGNATURE: MANDELIN HENDRICKS

POA

04/11/2011

Electronic Signature of Signing Officer or Director

Date