2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000006452

Entity Name: BACHMANN INDUSTRIES, INC.

FILED Mar 31, 2009 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
416 LEWISTON JUNCTION RD. AUBURN, ME 04210						
Current Mailing Address:				New Mailing Address:		
P.O. BOX 2150 AUBURN, ME 042112150						
FEI Number: 01-0470478		FEI Number Applied For ()	FEI Number Not Applicable ()		Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD 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	t		Date	
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	KOCH, WILLIAM	JUNCTION RD. P O BOX 2150	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VCHR () E ELGRET, RONAL AMALICASTRASS A-1130 VIENNA, A	SE 48/2	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KOCH, WILLIAM	JUNCTION RD. P O BOX 2150	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SELLINGER, MIC	JUNCTION RD. P O BOX 2150	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E DENCH, BRYAN I 95 MAIN ST. P.O. AUBURN, ME 04	. BOX 32100	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () E GAUTHIER, RACI 416 LEWISTON A AUBURN, ME 04	JUNCTION RD.	1	Title: Name: Address: City-St-Zip:	() Change () Addition	
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: RACLENE GAUTHIER D 03/31/2009