2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000004259

Entity Name: THOMAS BUILT BUSES, INC.

FILED Jan 22, 2008 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1408 COURTESY RD HIGH POINT, NC 27260					
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
1408 COURTESY RD HIGH POINT, NC 27260			P.O. BOX 2450 HIGH POINT, NC 27:	P.O. BOX 2450 HIGH POINT, NC 27261	
FEI Number:	56-0427960	FEI Number Applied For ()	El Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of C	urrent 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:					
	Electroni	c Signature of Registered Agent		Date	
Election Campaign Financing Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	C () PATTERSON, CI 2100 BURNTLE GREENSBORO,	AF RD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () NIELSEN, ROGE 9609 LIVINGSTO CAMAS, WA 98	ON MOUNTAIN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	P () O'LEARY, JOHN 3724 BURBANK WINSTON SALE	LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () BANGSTON, KE 1013 N ROTARY HIGH POINT, NO	/ DR	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () HURD, PAUL 4747 N CHANNE PORTLAND, OR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () SILVESTRI, PAL 4747 N CHANNE PORTLAND, OR	EL AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	

SIGNATURE: KEVIN BANGSTON VP 01/22/2008

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.