## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F95000004925

Entity Name: ORION BUS INDUSTRIES INC.

FILED Feb 07, 2007 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:	
P.O. BOX 7 165 BASE F ORISKANY		US	165 BASE ORISKAN	EROAD IY, NY 13424 US	
Current Mailing Address:			New Maili	New Mailing Address:	
	HURST ROAD JGA, ONTARIC	CANADA, ON L5J 4T8			
FEI Number:	06-1425755	FEI Number Applied For ( )	FEI Number Not App	plicable ( ) Certificate of Status Desired ( )	
Name and	Address of Cu	ırrent Registered Agent:	Name and	d Address of New Registered Agent:	
1200 SOUT	ORATION SYS TH PINE ISLAN DN, FL 33324				
The above in the State		ubmits this statement for the pu	rpose of changing i	its registered office or registered agent, or both,	
SIGNATUR	!E:				
	Electronic	Signature of Registered Agen	t	Date	
Election Cam	paign Financing	Trust Fund Contribution ( ).			
OFFICERS	AND DIRECT	ORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	PD () I STRECKER, AND 6012 HIGH POIN GREENSBORO,	T ROAD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	CCO () I SCULLY, PATRIO 6012-B HIGH PO GREENSBORO,	INT ROAD	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	HARRY, RENDE 350 HAZELHURS		Title: Name: Address: City-St-Zip:	CFO (X) Change ( ) Addition HARRY, RENDEL 350 HAZELHURST ROAD MISSISSAUGA, ONTARIO CANADA, ON L5J 4T8	
Title: Name: Address: City-St-Zip:	V () I BRAGER, MARK 350 HAZELHURS MISSISSAUGA, O		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	CRASSWELLER 350 HAZELHURS	Delete , CHRISTOPHER L ST ROAD DNTARIO CANADA, ON L5J 4T8	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	1()	Delete	Title: Name: Address: City-St-Zip:	O ( ) Change (X) Addition HEUMAN, DOUGLAS H 350 HAZELHURST ROAD MISSISSAUGA, ONTARIO CANADA, ON L5J 4T8	

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER L. CRASSWELLER S 02/07/2007

Electronic Signature of Signing Officer or Director Date