2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000000903

Entity Name: BRIDGE TERMINAL TRANSPORT, INC.

FILED Apr 27, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
6000 CARNEGIE BLVD CHARLOTTE, NC 28209				4701 HEDGEMORE DRIVE CHARLOTTE, NC 28209		
Current Mailing Address:				New Mailing Address:		
TAX DEPT P.O BOX 880 MADISON, NJ 07940			2 GIRALDA FARMS MADISON AVENUE MADISON, NJ 07940			
FEI Number:	El Number: 22-2624077 FEI Number Applied For () FEI Num		nber 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	İ			Date
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	BROWN, CLARK 6000 CARNEGIE CHARLOTTE, NO D () I CONNORS, PHIL	BLVD 28209 Delete IP V MS, MADISON AVENUE		Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	CONNORS, PHIII 4701 HEDGEMO CHARLOTTE, NO D (X) SPROAT, THOM	DRE DRIVE C 28209 Change () Addition AS MS, MADISON AVENUE
Title: Name: Address: City-St-Zip: Title:	CD () I BRUNER, J RUS 2 GIRALDA FARI MADISON, NJ 0	SELL MS, MADISON AVENUE 7940		Title: Name: Address: City-St-Zip: Title:	BRUNER, J RUS 2 GIRALDA FAR MADISON, NJ 0	MS, MADISON AVENUE
Name: Address: City-St-Zip:	DROGAN, RONA 6000 CARNEGIE CHARLOTTE, NO	LD D BLVD		Name: Address: City-St-Zip:	DROGAN, RONA 4701 HEDGEMO CHARLOTTE, NO	ALD D DRE DRIVE
Title: Name: Address: City-St-Zip:	VP () I WHITE, BYRON 6000 CARNEGIE CHARLOTTE, NO	BLVD		Title: Name: Address: City-St-Zip:	NICOLAISEN, M	MS, MADISON AVENUE
Title: Name: Address: City-St-Zip:	ST () I ANDERSEN, KIM 6000 CARNEGIE CHARLOTTE, NO	BLVD		Title: Name: Address: City-St-Zip:	ST (X) ANDERSEN, KIN 4701 HEDGEMO CHARLOTTE, NO	RE DRIVE

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: KIM K ANDERSEN ST 04/27/2007