2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2008
Secretary of State

DOCUMENT# F98000000903

Entity Name: BRIDGE TERMINAL TRANSPORT, INC.

Current Principal Place of Business:

4701 HEDGEMORE DRIVE
CHARLOTTE, NC 28209

New Principal Place of Business:

Current Mailing Address:

2 GIRALDA FARMS
MADISON AVENUE
MADISON, NJ 07940

New Mailing Address:

FEI Number: 22-2624077 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: CONNORS, PHILIP V
Address: 4701 HEDGEMORE DRIVE
City-St-Zip: CHARLOTTE, NC 28209

Title: D ( ) Delete
Name: SPROAT, THOMAS
Address: 2 GIRALDA FARMS, MADISON AVENUE
City-St-Zip: MADISON, NJ 07940

Title: D ( ) Delete
Name: BRUNER, J RUSSELL
Address: 2 GIRALDA FARMS, MADISON AVENUE
City-St-Zip: MADISON, NJ 07940

Title: VP ( ) Delete
Name: DROGAN, RONALD D
Address: 4701 HEDGEMORE DRIVE
City-St-Zip: CHARLOTTE, NC 28209

Title: D ( ) Delete
Name: NICOLAISEN, MORTEN K
Address: 2 GIRALDA FARMS, MADISON AVENUE
City-St-Zip: MADISON, NJ 28209

Title: ST ( ) Delete
Name: ANDERSEN, KIM K
Address: 4701 HEDGEMORE DRIVE
City-St-Zip: CHARLOTTE, NC 28209

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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 04/28/2008

Electronic Signature of Signing Officer or Director — Date