## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# H54136

Entity Name: BART, INC.

Title:

Name:

Address:

City-St-Zip:

VΡ

MULLIS, CAROL R

301 S. COLLEGE ST

( ) Delete

CHARLOTTE, NC 282880630

FILED Apr 24, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19808 **Current Mailing Address: New Mailing Address:** 2711 CENTERVILLE ROAD, STE. 400 WILMINGTON, DE 19808 FEI Number: 59-2592191 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: THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE, FL 32301 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 Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: PRFS () Delete Title: () Change () Addition MCGEE, ROBERT J Name: Name: 401 S. TRYON STREET Address: Address: City-St-Zip: CHARLOTTE, NC 28202 City-St-Zip: Title: Title: SEC () Delete S/D (X) Change ( ) Addition Name: DUBIE, CAROL A Name: DUBIE, CAROL A 123 S. BROAD STREET 123 S. BROAD STREET Address: Address: PHILADELPHIA, PA 19109 PHILADELPHIA, PA 19109 City-St-Zip: City-St-Zip: Title: Title: TRES ( ) Delete () Change () Addition BURR, JAMES F Name: Name: 301 S. COLEGE STREET Address: Address: CHARLOTTE, NC 282880630 City-St-Zip: 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.

Title:

Name:

Address:

City-St-Zip:

VΡ SIGNATURE: APRILLE M MITCHELL 04/24/2008

(X) Change ( ) Addition

MITCHELL, APRILLE M

CHARLOTTE, NC 282880630

301 S. COLLEGE ST