
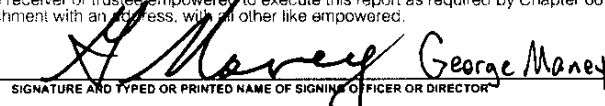


# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

08 JUL -2 PM 2:01

CLERK OF STATE  
TALLAHASSEE, FLORIDA

<b>DOCUMENT # L32294</b> 1. Entity Name <b>AMERICAN COACH LINES OF JACKSONVILLE, INC.</b>					
Principal Place of Business <b>5430 LBJ FREEWAY, 3 LINCOLN CENTER STE 1075 DALLAS, TX 75240</b>			Mailing Address <b>5430 LBJ FREEWAY, 3 LINCOLN CENTER STE 1075 DALLAS, TX 75240</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-3001360</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Amended AR is \$61.25</b>		9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP BERGSTROM, WILLIAM PRES DIR <input type="checkbox"/> Delete <b>5430 LBJ FREEWAY, 3 LINCOLN CENTER, STE 1075 DALLAS, TX 75240</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	ASVPC <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Linda King 5430 LBJ FREEWAY, 3 LINCOLN CENTER, STE 1075 DALLAS TX 75240</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	AS <input checked="" type="checkbox"/> Delete <b>CARROLL, DAVID ASEC 5430 LBJ FREEWAY, 3 LINCOLN CENTER, STE 1075 DALLAS, TX 75240</b>		TITLE NAME STREET ADDRESS CITY - ST - ZIP	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Robert Finke 5430 LBJ FREEWAY, 3 LINCOLN CENTER, STE 1075 DALLAS, TX 75240</b>	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TSVP <input type="checkbox"/> Delete <b>MANEY, GEORGE TRESECV 5430 LBJ FREEWAY, 3 LINCOLN CENTER, STE 1075 DALLAS, TX 75240</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>200132472242 07/08/08--01021--008 **\$61.25</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPGM <input type="checkbox"/> Delete <b>O'NEILL, FRANK VPGMNGR 5430 LBJ FREEWAY, 3 LINCOLN CENTER, STE 1075 DALLAS, TX 75240</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition <b>\$77 1/2</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DIR <input checked="" type="checkbox"/> Delete <b>LENTZSCH, CRAIG DIR 5430 LBJ FREEWAY, 3 LINCOLN CENTER, STE 1075 DALLAS, TX 75240</b>		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b>  <b>George Maney</b> <b>6/20/08</b> <b>972.354.3500</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					