

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P34526

(4)

1. Corporation Name

B & B TRANSIT, INC.

Principal Place of Business

Mailing Address

2700 MILLER ROAD  
KALAMAZOO MI 49001

2700 MILLER ROAD  
KALAMAZOO MI 49001



2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc	26	Suite, Apt. #, etc
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25		30	

3. Date Incorporated or Qualified	3a. Date of Last Report
07/01/1991	05/01/1995
4. FEI Number	Applied For
38-2003867	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
<input type="checkbox"/>	
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<input type="checkbox"/>	
8. This corporation has liability for intangible tax under s. 193.032 Florida Statutes	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature by either principal officer or registered agent and the date of signature.

(NOTE: Registered Agent signature required when resigning.)

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	VD
NAME	KELLER, TOM E.	1.2 NAME	
STREET ADDRESS	2700 MILLER ROAD	1.3 STREET ADDRESS	
CITY - ST - ZIP	KALAMAZOO MI	1.4 CITY - ST - ZIP	
TITLE	VD	2.1 TITLE	PD
NAME	KELLER, TERRY	2.2 NAME	
STREET ADDRESS	2700 MILLER ROAD	2.3 STREET ADDRESS	
CITY - ST - ZIP	KALAMAZOO MI	2.4 CITY - ST - ZIP	
TITLE	S	3.1 TITLE	
NAME	KELLER, ELAINE E.	3.2 NAME	
STREET ADDRESS	2700 MILLER ROAD	3.3 STREET ADDRESS	
CITY - ST - ZIP	KALAMAZOO MI	3.4 CITY - ST - ZIP	
TITLE	TD	4.1 TITLE	
NAME	PORTER, TERESA A.	4.2 NAME	
STREET ADDRESS	2700 MILLER ROAD	4.3 STREET ADDRESS	
CITY - ST - ZIP	KALAMAZOO MI	4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/96

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