

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 08:00 AM
Secretary of State

DOCUMENT # P36729

1. Entity Name
BULKMATIC TRANSPORT COMPANY



Principal Place of Business
**2001 NORTH CLINE AVENUE
GRIFFITH, IN 46319**

Mailing Address
**2001 NORTH CLINE AVENUE
GRIFFITH, IN 46319**



04092008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-2589105

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
110 NORTH MAGNOLIA STREET
TALLAHASSEE, FL 32301**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

1100000910763

05/07/08-80093-017 150.00

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD BINGHAM, A. Y., JR. 2001 N CLINE AVENUE GRIFFITH, IN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SMITH, E. LARRY 2001 N CLINE AVENUE GRIFFITH, IN
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO HARMISON, DOUG 2001 N. CLINE AVE. GRIFFITH, IN 46319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPF FLAXMAYER, FRED J 2001 N. CLINE AVE. GRIFFITH, IN 46319
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE: *Fred J. Flaxmayer* **Fred J. Flaxmayer**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/08 (219) 972-7630

Date

Daytime Phone #