

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED**  
**Jun 07, 1999 8:00 am**  
**Secretary of State**

06-07-1999 90012 033 \*\*\*150.00

PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		FLORIDA DEPARTMENT OF STATE <b>Katherine Harris</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT #** 855613  
 1. Corporation Name  
**Con-Way Truckload Services, Inc.**

Principal Place of Business <b>3240 Hillview Avenue                  Palo Alto, CA 94304                  USA</b>	Mailing Address <b>3240 Hillview Avenue                  Palo Alto, CA 94304                  USA</b>
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DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified <b>2/22/1983</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
4. FEI Number <b>94-2747782</b>		
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees	
8. This corporation owes the current year Intangible Personal Property Tax.	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

9. Name and Address of Current Registered Agent

**The Prentice-Hall Corporation System, Inc.**  
**1201 Hays Street, Ste. 105**  
**Tallahassee, FL 32301**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	See Attached Listing	1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Eberhard G.H. Schmoller, Secretary 5/26/99 650/494-2900  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (11/98)

57 0579-90012-3:  
855613

**Directors, Officers Report**

**Con-Way Truckload Services, Inc.**

05/12/1999

**DIRECTORS**

<b>Gerald L. Detter</b>		<b>Director</b>
SSN:	185-34-9479	
Primary Address:	110 Parkland Plaza Ann Arbor, MI 48103	
<b>Scott J. Engers</b>		<b>Director</b>
SSN:	545-92-6301	
Primary Address:	110 Parkland Plaza Ann Arbor, MI 48103	
<b>Bryan M. Millican</b>		<b>Director</b>
SSN:	364-92-0487	
Primary Address:	110 Parkland Plaza Ann Arbor, MI 48103	
<b>Gregory L. Quesnel</b>		<b>Director</b>
SSN:	544-44-9555	
Primary Address:	3240 Hillview Avenue Palo Alto, CA 94304	
<b>Chutta Ratnathicam</b>		<b>Director</b>
SSN:	542-78-2029	
Primary Address:	3240 Hillview Avenue Palo Alto, CA 94304	
<b>Kevin C. Schick</b>		<b>Director</b>
SSN:	357-46-1700	
Primary Address:	110 Parkland Plaza Ann Arbor, MI 48103	
<b>Eberhard G. H. Schmoller</b>		<b>Director</b>
SSN:	567-58-0007	
Primary Address:	3240 Hillview Avenue Palo Alto, CA 94304	
<b>Douglas W. Stotlar</b>		<b>Director</b>
SSN:	269-50-8228	
Primary Address:	110 Parkland Plaza Ann Arbor, MI 48103	

**OFFICERS**

**Gregory L. Quesnel**

SSN: 544-44-9555  
Primary Address: 3240 Hillview Avenue  
Palo Alto, CA 94304

**Chairman of the Board**

570579-90012-33  
855613

**J. Ronald Linkous**

SSN: 230-68-9034  
Primary Address: 2322 Gravel Drive  
Fort Worth, TX 76118

**President and Chief Executive Officer**

**Robert C. Morgan**

SSN: 139-66-9606  
Primary Address: 2322 Gravel Drive  
Fort Worth, TX 76118

**Vice President - Sales**

**L. T. Powell, Jr.**

SSN: 225-82-8937  
Primary Address: 2322 Gravel Drive  
Fort Worth, TX 76118

**Vice President - Operations**

**Paul H. Herzog**

SSN:  
Primary Address: None given

**Controller**

**Eberhard G. H. Schmoller**

SSN: 567-58-0007  
Primary Address: 3240 Hillview Avenue  
Palo Alto, CA 94304

**Secretary**

**Kevin C. Schick**

SSN: 357-46-1700  
Primary Address: 110 Parkland Plaza  
Ann Arbor, MI 48103

**Treasurer**

**Charles J. Dragon**

SSN: 286-40-2668  
Primary Address: 1717 N.W. 21st Street  
Portland, OR 97209-1797

**Assistant Secretary**

**Scott J. Engers**

SSN: 545-92-6301  
Primary Address: 110 Parkland Plaza  
Ann Arbor, MI 48103

**Assistant Secretary**

**J. Craig Boretz**

SSN: 546-82-8228  
Primary Address: 1717 N.W. 21st Avenue  
Portland, OR 97209-1797

**Assistant Treasurer**

**R. Guy Kraines**

SSN: 334-46-3815  
Primary Address: 3240 Hillview Avenue  
Palo Alto, CA 94304

**Assistant Treasurer**