FILED "2000 UNIFORM BUSINESS REPORT (UBR) Aug 04, 2000 8:00 am Secretary of State DOCUMENT # F93000003172 ROAD RESCUE INCORPORATED 08-04-2000 90006 018 ***550.00 Principal Place of Business Mailing Address 1700 SOUTH EL CAMINO REAL 1700 SOUTH EL CAMINO REAL カンハナント AUU71383 STE 502 STE 502. SAN MATÉO CA 94402 SAN MATEO CA 94402 2. Principal Place of Business 3. Mailing Address 10777 N.W. FREEWAY Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. STE. 200 Applied For City & State City & State 4. FEI Number 76-0211807 HOUSTON, TX Not Applicable \$8.75 Additional Zip Country Country 5. Certificate of Status Desired 77014 US Fee Reguired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$550.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After SEPTEMBER 13, 2000 Min. will be \$750.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11, CHAIRMA N - Change Addition TITLE TITLE NAME NAME TAWEEL, KEVIN STREET ADDRESS STREET ADDRESS ROAD RESCUE INC. 1700 S EL CAMINO REAL 502 CITY-ST-ZIP CITY-ST-ZIP SAN MATEO CA PRESIDENT Change ☐ Addition TITLE PS ☐ Delete TITLE ELLIS, R J RE NAME NAME STREET ADDRESS STREET ADDRESS 1700 S EL CAMINO REAL CITY-ST-ZIP CITY-ST-ZIP SAN MATEO CA Delete Addition C\=o ☐ Change TITLE TITLE Gerald Risk THOMAJAN, CHRISTOPHER R INC NAME 1700 S. EL CAMINO REAL STE 502 STREET ADDRESS 1700 S EL CAMINO REAL STREET ADDRESS CITY-ST-ZIP SAN MATEO, CA CITY-ST-7IP SAN MATEO CA Delete ☐ Addition TITLE **VPM** TITLE CLARK, WILLIAM R INC NAME NAME STREET ADDRESS STREET ADDRESS 1240 IROQUOIS AVE, STE 510 CITY-ST-ZIP CITY-ST-ZIP NAPERVILLE IL DIRECTUR Change ☐ Addition ☐ Defete TITLE TITLE DODSON, DAVID A NAME NAME 11 Newbury Street STREET ADDRESS STREET ADDRESS 625 BODWELL-ST-EXTENSION: STE-800 CITY-ST-ZIP CITY-ST-ZIP Boston, MA AVON MA DIRECTOR TH Change ☐ Addition TITLE ☐ Delete TITLE NAME OSTER, ROBERT NAME STREET ADDRESS STREET ADDRESS 3000 SAN HILL RD, BLDG 3, STE 210 CITY-ST-ZIP CITY-ST-7IP MENLO PARK CA 13. 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 report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 11 or Block 12 if changed, or on an attachment with an address with all other like empowered.

Date

Daytime Phone #

SIGNATURE ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

(F93000003772) AUD11383

Title:

Director

Name:

William P. Egan

Street Address:

One Post Office Square Suite 3800

City-St-Zip:

Boston, MA 02109

Title:

Director

Name:

H. Irving Grousbeck

Street Address:

518 Memorial Way - Room L336

City-St-Zip:

Stanford, CA 94305-5015

Title:

Director

Name:

Joel C. Peterson

Street Address:

111 East Broadway Suite 1080

City-St-Zip: ----

Salt Lake City, UT 84111-5225

Title:

Controller

Name:

Larry Wood

Street Address:

10777 Northwest Freeway Suite 200

City-St-Zip:

Houston, TX 77092