FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 AM 9:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F94000006188 (6)**

1. Corporation Name

NORTH AMERICAN VAN LINES, INC.

Principal Place of Business	Mailing Address
4267 1/2 N. EDGEWOOD AVENUE JACKSONVILLE FL 32205	4267 1/2 N. EDGEWOOD AVENUE JACKSONVILLE FL 32205

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 5001 US Hwy 30 W.	26 5001 US Hwy 30 W.
Suite, Apt. #, etc. 22 P.O. Box 988	Suite, Apt. #, etc. 27 P.O. Box 988
City & State 23 FORT WAYNE, IN	City & State 28 FORT WAYNE, IN
Zip 24 46801-0988 Country 25 US	Zip 29 46801-0988 Country 30 US

3. Date Incorporated or Qualified: **12/05/1994**
3a. Date of Last Report:
4. FEI Number: **52-1840893** ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ — **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 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 **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 ____________________ DATE ________

12. OFFICERS AND DIRECTORS

TITLE	PCD
NAME	BROGAN, R A
STREET ADDRESS	5001 U.S. HIGHWAY 30 WEST
CITY-ST-ZIP	FORT WAYNE IN
TITLE	V
NAME	MILEWSKI, RONALD L
STREET ADDRESS	5001 U.S. HIGHWAY 30 WEST
CITY-ST-ZIP	FORT WAYNE IN
TITLE	S
NAME	BURNS, GERALD A
STREET ADDRESS	5001 U.S. HIGHWAY 30 WEST
CITY-ST-ZIP	FORT WAYNE IN
TITLE	T
NAME	HUNDAGEN, PETER M
STREET ADDRESS	5001 U.S. HIGHWAY 30 WEST
CITY-ST-ZIP	FORT WAYNE IN
TITLE	D
NAME	GOODE, DAVID R
STREET ADDRESS	3 COMMERCIAL PLACE
CITY-ST-ZIP	NORFOLK VA
TITLE	D
NAME	TURBYVILLE, JOHN R
STREET ADDRESS	3 COMMERCIAL PLACE
CITY-ST-ZIP	NORFOLK VA

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

(six blocks: TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP, each with ☐ Change ☐ Addition — all blank)

14. [illegible]

SIGNATURE: [signature] MARK D. MILLER (219) 429-3897
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone

0408486 FP