10'

The state of the s

-

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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 29 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9400006188 (6)

NORTH AMERICAN VAN LINES, INC.

C T CORPORATION SYSTEM

1200 PINE ISLAND ROAD

PLANTATION FL 33324

rincipal Place of Business		Mailing Address					
5001 US HWY 30 P.O. BOX 988 FORT WAYNE IN		5001 US HWY 30 WEST P.O. BOX 988 FORT WAYNE IN 46801-0988		DO NOT WRITE IN THIS SPACE			
US .		U\$		3. Date Incorporated or Qualified 12/05/1994			
Principal Place of Business		2a. Mailing Add	iress	4. FEI Number	Applied For		
		26		52-1840893 Not App			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country 25	Z _I p	Country 30	This corporation owes or has paid the Personal Property Tax due June 30.	current year Intangible Yes No		
	, Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Register	ed Agent		

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

82

83

Name

Street Address (P.O. Box Number is Not Acceptable)

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	· · · · · · · · · · · · · · · · · · ·										
12,	Signature, typed or printed name of registered agent and little if OFFICERS AND DIRECT		Registered Agent signatur	e required when reinstalling) ADDITIONS/CHANGES TO OFFICER:	NATE DIRECTOR	C INI 10					
TITLE	CO OFFICERS AND DIRECT	DELETE	1.1 TITLE	Pep	Change	Addition					
	BROGAN, R A	L., DECETE	1	UBER A BARRY	CE) Change	TH Macition i					
NAME	5001 U.S. HIGHWAY 30 WEST		1.2 NAME	5001 US HIGHWAY 30 WEST							
STREET ADDRESS	FORT WAYNE IN		1.3 STREET ADDRESS	Sang Lawley W. HU.010							
CITY-ST-ZIP	POUL MATINE IN		1.4 CITY-ST-ZIP	FORTWAYNE, IN 46818		1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
TITLE	V	☐ DELETE	21 TITLE		☐ Change	Addition					
NAME	MILEWSKI, RONALD L		2.2 NAME								
STREET ADDRESS	5001 U.S. HIGHWAY 30 WEST		2.3 STREET ADDRESS								
CITY-ST-ZIP	FORT WAYNE IN		2. 4 CITY - ST - ZIP								
TITLE	\$	DELETE	3.1 TITLE		☐ Change	☐ Addition					
NAME	Burns, Gerald A		3.2 NAME								
STREET ADDRESS	5001 U.S. HIGHWAY 30 WEST		3.3 STREET ADDRESS			į					
CITY-ST-ZIP	FORT WAYNE IN		3.4. CITY-ST-2IP								
TITLE	7	DELETE	4.1 THILE		Change	Addition					
NAME	HUNDAGEN, PETER M		4. 2 NAME								
STREET ADDRESS	5001 U.S. HIGHWAY 30 WEST		4,3 STREET ADDRESS								
CITY-ST-ZIP	FORT WAYNE IN		4.4 CITY - ST - ZIP								
TITLE	Ū	DELETE	51 TITLE	D	✓ Change	☐ Addition					
NAME	QOODE, DAVID R		5.2 NAME	Pieper, Charles		į					
STREET ADDRESS	3 COMMERCIAL PLACE		5.3 STREET ADDRESS	375 PARK AVENUE							
CITY-ST-ZIP	NORFOLK VA		5.4 CITY - ST - ZIP	NEW YORK, NY 10152	_						
TITLE	D	DELETE	6.1 TITLE	D	Change	Addition					
NAME	WOLF, HENRY C		6.2 NAME	CARPENTER JEDMUND							
STREET ADDRESS	3 COMMERCIAL PLACE		6.3 STREET ADDRESS	STS PARK AVENUE							

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 truestoe 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 en an attachment with an address

MATURE: \$\int \(\frac{1}{2} \rightarrow \

North American Van Lines, Inc. FEIN: 52-1840893 1998 Annual Report

Item 12, Additional Officers:

Assistant Treasurer

Miller, Mark

5001 US Highway 30 West Fort Wayne, IN 46818

Item 12. Additional Directors:

Director

的是一个时间,我们就是一个时间,我们就是一个时间,我们就是一个时间,我们就是一个时间,我们就是一个时间,我们也会一个时间,我们也会一个时间,我们也会一个时间,我们 一个时间,一个时间,我们就是一个时间,我们就是一个时间,我们就是一个时间,我们就是一个时间,我们就是一个时间,我们就是一个时间,我们就是一个时间,我们就是一个时间

Conway, Kevin 375 Park Avenue New York, NY 10152