

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F95000005912

1. Entity Name

WORLDWAY LOGISTICS CORPORATION ✓

FILED
Jul 18, 2000 8:00 am
Secretary of State

07-18-2000 90089 040 ***550.00

Principal Place of Business

15700 WEST 103RD ST.
 LEMONT IL 60439

Mailing Address

P.O. BOX 10048
 FORT SMITH AR 72917-0048
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

56-1867557

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
 1200 SOUTH PINE ISLAND ROAD
 PLANTATION FL 33324

Name

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

City

FL

Zip Code

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)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$550.00
After SEPTEMBER 13, 2000 Min. will be \$750.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DC Delete
 NAME YOUNG, ROBERT A III
 STREET ADDRESS 3801 OLD GREENWOOD RD
 CITY-ST-ZIP FT SMITH AR 72903

TITLE D/C/P Change Addition
 NAME YOUNG, ROBERT A III
 STREET ADDRESS
 CITY-ST-ZIP

TITLE S Delete
 NAME COOPER, RICHARD F
 STREET ADDRESS 3801 OLD GREENWOOD RD
 CITY-ST-ZIP FT SMITH AR

TITLE S/D Change Addition
 NAME COOPER, RICHARD F
 STREET ADDRESS
 CITY-ST-ZIP

TITLE AT Delete
 NAME MORTON, LAVON J
 STREET ADDRESS 3801 OLD GREENWOOD RD
 CITY-ST-ZIP FT SMITH AR 72903

TITLE AV Change Addition
 NAME MORTON, LAVON J
 STREET ADDRESS
 CITY-ST-ZIP

TITLE DP Delete
 NAME SZE, ANDY
 STREET ADDRESS 3801 OLD GREENWOOD RD
 CITY-ST-ZIP FORT SMITH AR 72903

TITLE AT Change Addition
 NAME MCREYNOLDS, JUDY R
 STREET ADDRESS 3801 OLD GREENWOOD RD
 CITY-ST-ZIP FORT SMITH, AR 72903

TITLE AT Delete
 NAME MORTON, J L
 STREET ADDRESS 3801 OLD GREENWOOD RD
 CITY-ST-ZIP FT SMITH AR 72903

TITLE AS Change Addition
 NAME SPEARMAN, RICHARD L
 STREET ADDRESS 3801 OLD GREENWOOD RD
 CITY-ST-ZIP FORT SMITH, AR 72903

TITLE TD Delete
 NAME LOEFFLER, DAVID E
 STREET ADDRESS 3801 OLD GREENWOOD RD
 CITY-ST-ZIP FT MSITH AR

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Richard L. Spearman
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard L. Spearman 7/10/2000 501-494-6801
 Date Daytime Phone #

CP2E034 (5/00)