

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J08698

FILED
Apr 20, 2011
Secretary of State

Entity Name: SIRVA CONTAINER LINES, INC.

Current Principal Place of Business:

5001 US HWY 30 W
FT WAYNE, IN 46818 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 988
FT WAYNE, IN 468010988 US

New Mailing Address:

FEI Number: 35-1674670 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PRE
Name: WOLFE, MICHAEL T
Address: 700 OAKMONT LN
City-St-Zip: WESTMONT, IL 60559

Title: SEC
Name: KUS, SUSAN H
Address: 5001 US HWY 30 W
City-St-Zip: FORT WAYND, IN 46818

Title: TREA
Name: GATHANY, DOUGLAS V
Address: 700 OAKMONT LN.
City-St-Zip: WESTMONT, IL 60559

Title: ATRE
Name: CHESTER, GARY D
Address: 700 OAKMONT LANE
City-St-Zip: WESTMONT, IL 60559

Title: DIR
Name: SMITH, JAMES G
Address: 700 OAKMONT LN.
City-St-Zip: WESTMONT, IL 60559

Title: DIR
Name: LUCAS, WES W
Address: 700 OAKMONT LANE
City-St-Zip: WESTMONT, IL 60559

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GARY D. CHESTER

ATRE

04/20/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date