FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT
1996

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

DOCUMENT # L10687 (6)

1. Corporation Name
GATX LOGISTICS PROPERTIES, INC.

Principal Place of Business
1301 RIVERPLACE BLVD
1200
JACKSONVILLE FL 32207
US

Mailing Address c/o Patrick J. Murphy
1301 RIVERPLACE BLVD
1200
JACKSONVILLE FL 32207
US

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 08/22/1989
3a. Date of Last Report: 05/01/1995
4. FEI Number: 59-2966786 ☐ 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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301

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 ______ Signature, typed or printed name of new Registered Agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	GARDNER, MICHAEL J	
STREET ADDRESS	1301 RIVERPLACE BLVD SUITE 1200	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	T	☑ DELETE
NAME	DUNN, E. PAUL JR	
STREET ADDRESS	500 W MONROE	
CITY-ST-ZIP	CHICAGO IL	
TITLE	AS	☐ DELETE
NAME	LEVIN, JOHN D	
STREET ADDRESS	500 W MONROE	
CITY-ST-ZIP	CHICAGO IL	
TITLE	PD	☐ DELETE
NAME	NICOSIA, JOSEPH A	
STREET ADDRESS	1301 RIVERPLACE BLVD SUITE 1200	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	AT	☐ DELETE
NAME	BRANDT, SANDRA K	
STREET ADDRESS	500 WEST MONROE	
CITY-ST-ZIP	CHICAGO IL	
TITLE	VSD	☐ DELETE
NAME	MOORE, DANIEL D	
STREET ADDRESS	1301 RIVERPLACE BLVD SUITE 1200	
CITY-ST-ZIP	JACKSONVILLE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	T	☐ Change ☑ Addition
2.2 NAME	Brian Kenny	
2.3 STREET ADDRESS	500 W. Monroe	
2.4 CITY-ST-ZIP	Chicago, IL 60661	
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 trustee 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 on an attachment with an address.

SIGNATURE: [signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)