

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

FILED

Feb 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		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**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 08/22/1989 4. FEI Number 59-2966786 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ 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 registered agent and filed if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	1.1 TITLE	☐ Change ☐ Addition
NAME	GARDNER, MICHAEL J	1.2 NAME	
STREET ADDRESS	1301 RIVERPLACE BLVD SUITE 1200	1.3 STREET ADDRESS	
CITY- ST- ZIP	JACKSONVILLE FL	1.4 CITY- ST- ZIP	
TITLE	T	2.1 TITLE	☐ Change ☐ Addition
NAME	KENNY, BRIAN	2.2 NAME	
STREET ADDRESS	500 W MONROE	2.3 STREET ADDRESS	
CITY- ST- ZIP	CHICAGO IL	2.4 CITY- ST- ZIP	
TITLE	AS	3.1 TITLE	☒ Change ☐ Addition
NAME	LEVIN, JOHN D	3.2 NAME	
STREET ADDRESS	500 W MONROE	3.3 STREET ADDRESS	
CITY- ST- ZIP	CHICAGO IL	3.4 CITY- ST- ZIP	
TITLE	PD	4.1 TITLE	☐ Change ☐ Addition
NAME	NICOSIA, JOSEPH A	4.2 NAME	
STREET ADDRESS	1301 RIVERPLACE BLVD SUITE 1200	4.3 STREET ADDRESS	
CITY- ST- ZIP	JACKSONVILLE FL	4.4 CITY- ST- ZIP	
TITLE	AT	5.1 TITLE	☐ Change ☒ Addition
NAME	BRANDT, SANDRA K	5.2 NAME	
STREET ADDRESS	500 WEST MONROE	5.3 STREET ADDRESS	
CITY- ST- ZIP	CHICAGO IL	5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY- ST- ZIP		6.4 CITY- ST- ZIP	

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 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, upon an attachment with an address.

SIGNATURE:

Joseph A. Nicosia

1/23/98 (gdu) 391-2517

CR2E034 (10/97)