

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 03, 2002 8:00 am
Secretary of State

05-03-2002 90156 045 ***150.00

DOCUMENT # L10687

1. Entity Name

APL 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

3. Mailing Address

Tax Dept.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1111 Broadway

City & State

City & State

Oakland, CA

Zip

Country

Zip

Country

94607

4. FEI Number **59-2966786**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.

1201 HAYES ST.

STE. 105

TALLAHASSEE FL 32301

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 \$150.00
After May 1, 2002 Fee will be \$550.00
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	VD	☒ Delete
NAME	GARDNER, MICHAEL J	
STREET ADDRESS	1301 RIVERPLACE BLVD SUITE 1200	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	S	☒ Delete
NAME	CHARRON, KENNETH	
STREET ADDRESS	1301 RIVERPLACE BLVD. STE 1200	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	PD	☒ Delete
NAME	NICOSIA, JOSEPH A	
STREET ADDRESS	1301 RIVERPLACE BLVD SUITE 1200	
CITY-ST-ZIP	JACKSONVILLE FL	
TITLE	T	☒ Delete
NAME	WISE, BRUCE	
STREET ADDRESS	1301 RIVERPLACE, STE 1200	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE	VD	☒ Delete
NAME	WISE, BRUCE A	
STREET ADDRESS	1301 RIVER PLACE BLVD #1200	
CITY-ST-ZIP	JACKSONVILLE FL 32207	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	P	☐ Change ☒ Addition
NAME	Richard M. Metzler	
STREET ADDRESS	1111 Broadway	
CITY-ST-ZIP	Oakland, CA 94607	
TITLE	T	☐ Change ☒ Addition
NAME	Neal E. West	
STREET ADDRESS	1111 Broadway	
CITY-ST-ZIP	Oakland, CA 94607	
TITLE	S	☐ Change ☒ Addition
NAME	Ann F. Hase	
STREET ADDRESS	1111 Broadway	
CITY-ST-ZIP	Oakland, CA 94607	
TITLE	VP	☐ Change ☒ Addition
NAME	Mike Gardner	
STREET ADDRESS	1111 Broadway	
CITY-ST-ZIP	Oakland, CA 94607	
TITLE	VP	☐ Change ☒ Addition
NAME	William Villalon	
STREET ADDRESS	1111 Broadway	
CITY-ST-ZIP	Oakland, CA 94607	
TITLE	Assistant Secretary	☐ Change ☒ Addition
NAME	Kenneth Charron	
STREET ADDRESS	1111 Broadway	
CITY-ST-ZIP	Oakland, CA 94607	

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOUGLAS CANNON

4/15/02

Date

(570) 272-8000

Daytime Phone #

CR2E034 (9/01)