

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 23, 2001 8:00 am
Secretary of State

01-23-2001 90064 002 ***150.00

0578743

DOCUMENT # P12654			
1. Entity Name SOUTHEASTERN FREIGHT LINES, INC.			
Principal Place of Business 420 DAVEGO ROAD LEXINGTON SC 29073 US		Mailing Address P.O. BOX 1691 COLUMBIA SC 29202 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
UNITED STATES CORPORATION COMPANY 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, 2001 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			
TITLE	D ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CASSELS, W.T., JR.	NAME	
STREET ADDRESS	420 DAVEGA ROAD	STREET ADDRESS	
CITY-ST-ZIP	LEXINGTON SC	CITY-ST-ZIP	
TITLE	P ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	TAYLOR, PAUL D.	NAME	
STREET ADDRESS	420 DAVEGA ROAD	STREET ADDRESS	
CITY-ST-ZIP	LEXINGTON SC	CITY-ST-ZIP	
TITLE	S ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	STOREY, SHELBY D.	NAME	
STREET ADDRESS	420 DAVEGA ROAD	STREET ADDRESS	420 DAVEGA ROAD
CITY-ST-ZIP	LEXINGTON SC	CITY-ST-ZIP	
TITLE	V ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	BURLESON, J.R., JR.	NAME	
STREET ADDRESS	420 DAVEGA ROAD	STREET ADDRESS	420 DAVEGA ROAD
CITY-ST-ZIP	LEXINGTON SC	CITY-ST-ZIP	
TITLE	D ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	CASSELS, W. TOBIN, III	NAME	
STREET ADDRESS	420 DAVEGA ROAD	STREET ADDRESS	420 DAVEGA ROAD
CITY-ST-ZIP	LEXINGTON SC	CITY-ST-ZIP	
TITLE	VPC ☐ Delete	TITLE	☒ Change ☐ Addition
NAME	EDGE, P. THOMAS	NAME	
STREET ADDRESS	420 NAVELS RD	STREET ADDRESS	420 DAVEGA ROAD
CITY-ST-ZIP	LEXINGTON SC	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: P. Thomas Edge 11/10/01 803 939 3372
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)