2004 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P12654 03-12-2004 90024 029 ***150 00 SOUTHEASTERN FREIGHT LINES, INC. Principal Place of Business Mailing Address PYCLIDKY 420 DAVEGO ROAD P.O. BOX 1691 COLUMBIA, SC 29202 US LEXINGTON, SC 29073 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02272004 Cha-P CR2E034 (10/03) City & State Applied For City & State 4. FEI Number 57-0301199 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 6., Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name UNITED STATES CORPORATION COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYES ST. STE. 105 TALLAHASSEE, FL 32301 City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 AK May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. D TITLE TITLE ☐ Delete Change Addition CASSELS, W.T., JR. NAME NAME 420 DAVEGA ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LEXINGTON, SC CITY-ST-ZIP President TITLE Addition Delete TITLE ☐ Change COSSULL, W. TOBIH I NAME TAYLOR, PAUL D. NAME 420 DAVER Rd STREET ADDRESS 420 DAVEGA ROAD STREET ADDRESS CITY-ST-7IP LEXINGTON, SC CITY-ST-ZIP ecingtm, sc Delete s TITLE TITLE ☐ Change **Addition** Cosses, without the STOREY, SHELBY D. NAME NAME STREET ADDRESS 420 DAVENGA ROAD STREET ADDRESS CITY-ST-ZIP LEXINGTON, SC CITY-ST-ZIP exing the sc TITLE ☐ Delete TITLE ☐ Change ☐ Addition BURLESON, J.R., JR. NAME NAME STREET ADDRESS 420 DAVENGA ROAD STREET ADDRESS CITY-ST-ZIP LEXINGTON, SC CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE ☐ Delete CASSELS, W. TOBIN, III NAME 420 DAVENGA ROAD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP LEXINGTON, SC TITLE **VPC** Delete TITLE Change ☐ Addition EDGE, P. THOMAS NAME NAME 420 NAVELS RD STREET ADDRESS CITY-ST-ZIP LEXINGTON, SC-CITY-ST-ZIP --12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 2/27/04 SIGNATURE: Daytime Phone

FILED Mar 12, 2004 8:00 am