

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

55 MAY 11 AM 10:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **P38933** (8)  
1. Corporation Name:  
**CSX/SEA-LAND LOGISTICS, INC.**

Principal Place of Business: **150 ALLEN RD. LIBERTY CORNER NJ 07938 US**  
Mailing Address: **901 E CARY ST RICHMOND VA 23219 US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>05/19/1992</b>	3a. Date of Last Report <b>04/29/1994</b>
4. FEI Number <b>59-2863365</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.03F Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2b. Mailing Address
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.
22. City & State	27. City & State
24. ZIP	29. ZIP
25. Country	30. Country

9. Name and Address of Current Registered Agent

**C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

B1. Name  
B2. Street Address (P.O. Box Number is Not Acceptable)  
B3.  
B4. City  
**FL** B5. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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 607.0504, Florida Statutes.

SIGNATURE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS (If Applicable)	
12.1 NAME: <b>DCP KENWELL, W J</b>	12.2 STREET ADDRESS: <b>150 ALLEN RD LIBERTY CORNER NJ</b>	13.1 NAME: <b>DPM T. B. McCoy</b>	13.2 STREET ADDRESS: <b>150 Allen Road Liberty Corner, NJ 07938</b>
12.1 NAME: <b>AT KEMEZYS, V. M</b>	12.2 STREET ADDRESS: <b>150 ALLEN RD LIBERTY CORNER NJ</b>	13.1 NAME: <b>T R. Small</b>	13.2 STREET ADDRESS: <b>150 Alen Road Liberty Corner, NJ 07938</b>
12.1 NAME: <b>D HERCZEG, F. E</b>	12.2 STREET ADDRESS: <b>150 ALLEN RD LIBERTY CORNER NJ</b>	13.1 NAME: <b>D M. F. Arace, Jr.</b>	13.2 STREET ADDRESS: <b>10407 Centurion Pkwy, N Jacksonville, FL 32256</b>
12.1 NAME: <b>D RAJANI, P. R</b>	12.2 STREET ADDRESS: <b>150 ALLEN RD LIBERTY CORNER NJ</b>	13.1 NAME: <b>D W. W. Middleton, Jr.</b>	13.2 STREET ADDRESS: <b>150 Allen Road Liberty Corner, NJ 07938</b>
12.1 NAME: <b>D SORROW, R. T</b>	12.2 STREET ADDRESS: <b>200 INTERNATIONAL CIRCLE HUNT VALLEY MD</b>	13.1 NAME: <b>A S R. E. Gellersbach</b>	13.2 STREET ADDRESS: <b>901 E. Cary Street Richmond, VA 23219</b>
12.1 NAME: <b>VPS RUDNICK, A.A.</b>	12.2 STREET ADDRESS: <b>901 EAST CARY STREET RICHMOND VA</b>	13.1 NAME:	13.2 STREET ADDRESS:

14. I hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in this year's (1994) Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the receiver or transfer agent appointed 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 is an attachment with an address.

SIGNATURE: *Rachel E. Gellersbach* Rachel E. Gellersbach 5/5/95 804-782-1435  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERING OFFICER OR DIRECTOR