

FILED
Apr 22, 2000 8:00 am
Secretary of State

04-22-2000 90067 032 ***150.00

DOCUMENT # **P 38933**

1. Entity Name
CTI Holding, Inc.

Principal Place of Business
**One James Center
901 East Cary Street
Richmond, VA 23219**

Mailing Address
**One James Center
Attn: Rachel E. Geiersbach
901 East Cary Street
Richmond, VA 23219**

C0068984

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
**c/o CSX Corporation
One James Center
Richmond, VA 23219**

4. FEI Number
59-2863365

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent
**CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324**

7. Name and Address of New Registered Agent
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.

**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$250.00
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 NAME STREET ADDRESS CITY-ST-ZIP	P Paul R. Goodwin One James Center Richmond, VA 23219	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V Mark G. Aron One James Center Richmond, VA 2319	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Executive Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V James P. Peter One James Center Richmond, VA 23219	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS Alan A. Rudnick One James Center Richmond, VA 23219	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT Gregory R. Weber One James Center Richmond, VA 23219	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Rachel E. Geiersbach One James Center Richmond, VA 23219	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *Rachel E. Geiersbach* **4/14/2000** **804-782-1435**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Davitts Phone #
Rachel E. Geiersbach, Assistant Secretary

APR 10 '00 15:16

CR2E034 (9/99)