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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		 FLORIDA DEPARTMENT OF STATE Sandra B. Morfitt Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S61273 (6)			
1. Corporation Name GATX LOGISTICS NORPACK, INC.			
Principal Place of Business 1301 GULF LIFE DRIVE SUITE 1800 JACKSONVILLE FL 32207		Mailing Address 1301 GULF LIFE DRIVE SUITE 1800 JACKSONVILLE FL 32207	
2. Principal Place of Business 21 1301 Riverplace Blvd Suite, Apt. #, etc. 22 Suite 1200 City & State 23 Jacksonville, FL Zip 24 32207		25. Mailing Address 26 1301 Riverplace Suite, Apt. #, etc. 27 Suite 1200 City & State 28 Jacksonville, FL Zip 29 32207 Country 30 USA	
9. Name and Address of Current Registered Agent THE PRENTICE-HALL CORPORATION SYSTEM INC. 1201 HAYS STREET SUITE 105 TALLAHASSEE FL 32301			
10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 FL 86 Zip Code			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.			
SIGNATURE (Signature typed or printed name of registered agent and their address) (Print Registered Agent's full name and address) (Date)			
12. OFFICERS AND DIRECTORS			
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated 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, 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 12 or Block 13. (Signed, or on an attachment with an address)			

SIGNATURE:

Daniel D. Moore

4/28/95 (904) 396-2517