

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000004765 (0)

1. Corporation Name  
LANDSTAR CARRIER SERVICES, INC.

Principal Place of Business  
4160 WOODCOCK DR.  
JACKSONVILLE FL 32207

Mailing Address  
4160 WOODCOCK DR.  
JACKSONVILLE FL 32207

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 c/o Corporate Tax Dept.		09/12/1997	
22 City & State		27 PO Box 19135		4. FEI Number	
23 Zip		28 Jacksonville, FL		36-3965143	
24 Country		29 32245		Applied For	
		30 USA		Not Applicable	
9. Name and Address of Current Registered Agent				5. Certificate of Status Desired	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324				<input type="checkbox"/> \$8.75 Additional Fee Required	
				6. Election Campaign Financing	
				<input type="checkbox"/> \$5.00 May Be Added to Fees	
				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL
85 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CDP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CROWE, JEFFREY C	1.2 NAME	
STREET ADDRESS	4160 WOODCOCK DR.	1.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32207	1.4 CITY-ST-ZIP	
TITLE	CDVT	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GERKENS, HENRY H	2.2 NAME	
STREET ADDRESS	4160 WOODCOCK DR.	2.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32207	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PUNDT, JEFFREY L	3.2 NAME	
STREET ADDRESS	4160 WOODCOCK DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32207	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZIMMER, LAWRENCE E	4.2 NAME	
STREET ADDRESS	4160 WOODCOCK DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32207	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAROSE, ROBERT C	5.2 NAME	
STREET ADDRESS	4160 WOODCOCK DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32207	5.4 CITY-ST-ZIP	
TITLE	VS	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARVEY, MICHAEL L	6.2 NAME	
STREET ADDRESS	4160 WOODCOCK DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE FL 32207	6.4 CITY-ST-ZIP	

14. 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 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 if changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_

Robert C. LaRose (904) 390-1234

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0032814

CR2E034 (10/97)