## **2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# J08698

Entity Name: SIRVA CONTAINER LINES, INC.

**Current Principal Place of Business:** 

5001 US HWY 30 W FT WAYNE. IN 46818 FILED
Apr 16, 2013
Secretary of State
CC2514037006

## **Current Mailing Address:**

P O BOX 988

FT WAYNE. IN 46801-0988 US

FEI Number: 35-1674670 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US

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:

Electronic Signature of Registered Agent

Date

## Officer/Director Detail:

Title	PRE	Title	ASST. SECRETARY
Name	COOLIDGE, ANDREW P	Name	RUDOLPH, JANINE E
Address	5001 US HWY 30 W	Address	5001 US HWY 30 W
City-State-Zip:	FT WAYNE IN 46818	City-State-Zip:	FORT WAYND IN 46818

Title TREA Title ATRE

NameGATHANY, DOUGLAS VNameULBERT, BRIAN PAddress700 OAKMONT LN.Address700 OAKMONT LANECity-State-Zip:WESTMONT IL 60559City-State-Zip:WESTMONT IL 60559

Title DIR Title DIR

NameOBERDORF, THOMASNameLUCAS, WES WAddress700 OAKMONT LN.Address700 OAKMONT LANECity-State-Zip:WESTMONT IL 60559City-State-Zip: WESTMONT IL 60559

Title VP Title SECRETARY

NameNEWBAUER, CHERYL DNameCHAMELI, DAVID PAddress5001 US HWY 30 WAddress700 OAKMONT LANECity-State-Zip:FT WAYNE IN 46818City-State-Zip: WESTMONT IL 60559

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: BRIAN P ULBERT

ASSISTANT TREASURER

04/16/2013 Date