#### 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000005120

**Entity Name: CARDINAL LOGISTICS MANAGEMENT CORPORATION** 

**FILED** Apr 06, 2017 **Secretary of State** CC2696820877

### **Current Principal Place of Business:**

5333 DAVIDSON HIGHWAY CONCORD, NC 28027

### **Current Mailing Address:**

5333 DAVIDSON HIGHWAY CONCORD, NC 28027

FEI Number: 56-1271090 Certificate of Status Desired: No

#### Name and Address of Current Registered Agent:

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

City-State-Zip:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title CEO Title VΡ

Name HOSTETLER, THOMAS Name WHITTEN, KIMMY G

5333 DAVIDSON HIGHWAY 5333 DAVIDSON HIGHWAY Address Address

City-State-Zip: CONCORD NC 28027 CONCORD NC 28027 City-State-Zip:

Title Р Title Т

Name BOWMAN, JERRY Name ROBERTS, MICHAEL Address 5333 DAVIDSON HWY Address 5333 DAVIDSON HIGHWAY CONCORD NC 28027 City-State-Zip: City-State-Zip: CONCORD NC 28027

Title DIRECTOR Title С

Name MCLOUGHLIN, VINCENT Name MCLOUGHLIN, VINCENT Address 5333 DAVIDSON HIGHWAY Address 5333 DAVIDSON HWY. City-State-Zip: CONCORD NC 28027 CONCORD NC 28027

Title DIRECTOR Title DIRECTOR

Name BOWMAN, JERRY HOSTETLER, THOMAS Name

5333 DAVIDSON HIGHWAY Address 5333 DAVIDSON HIGHWAY Address City-State-Zip: CONCORD NC 28027 CONCORD NC 28027 City-State-Zip:

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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.

04/06/2017 SIGNATURE: KIMMY G WHITTEN VICE PRESIDENT

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name WHITE, THOMAS

Address 5333 DAVIDSON HWY

City-State-Zip: CONCORD NC 28027

Title OTHER

Name WHITE, THOMAS

Address 5333 DAVIDSON HWY

City-State-Zip: CONCORD NC 28027

Title SECRETARY

Name STUPP, JEFFREY

Address 5333 DAVIDSON HWY

City-State-Zip: CONCORD NC 28027