

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F17000005163

Entity Name: CENTRAL GULF LINES, INC.

Current Principal Place of Business:

2200 ELLER DR
FT LAUDERDALE, FL 33316

Current Mailing Address:

PO BOX 13038
FT LAUDERDALE, FL 33316 US

FEI Number: 72-0388979

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 S PINE ISLAND RD
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: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title CEO, DIRECTOR
Name FABRIKANT, ERIC
Address 2200 ELLER DR
City-State-Zip: FT LAUDERDALE FL 33316

Title DIRECTOR
Name THOROGOOD, DANIEL J
Address 2200 ELLER DR
City-State-Zip: FT LAUDERDALE FL 33316

Title DIRECTOR/PRESIDENT
Name NUZUM, HENRY
Address 1201 5TH ST NW
STE 600
City-State-Zip: WASHINGTON DC 20005

Title VP/SECRETARY
Name MANEKIN, LISA
Address 2200 ELLER DR
City-State-Zip: FT LAUDERDALE FL 33316

Title VP/TREASURER
Name WEINS, BRUCE
Address 2200 ELLER DR
City-State-Zip: FT LAUDERDALE FL 33316

Title CHIEF OPERATING OFFICER
Name GREHAN, BROOKE
Address 11 N. WATER STREET
City-State-Zip: MOBILE AL 36602

Title CHAIRMAN
Name FABRIKANT, CHARLES
Address 2200 ELLER DR
City-State-Zip: FORT LAUDERDALE FL 33316

Title VP
Name DENNING, ARTHUR (TOM)
Address 2200 ELLER DR
City-State-Zip: FORT LAUDERDALE FL 33316

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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.

SIGNATURE: LISA MANEKIN

VP/SECRETARY

04/23/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name GROEN, RICK
Address 2200 ELLER DR
City-State-Zip: FORT LAUDERDALE FL 33316

Title DIRECTOR OF TECHNOLOGY
Name PHENIX, DAVID
Address CITYCENTRE TWO
818 TOWN & COUNTRY BLVD. SUITE 200
City-State-Zip: HOUSTON TX 77024

Title VP
Name JOHNSTON, PETER
Address 11 N. WATER STREET, #18290
City-State-Zip: MOBILE AL 36602

Title CIO
Name SCHIFANO, MICHAEL
Address CITYCENTRE TWO
818 TOWN & COUNTRY BLVD. SUITE
200
City-State-Zip: HOUSTON TX 77024

Title DIRECTOR OF INT'L & GOV'T
BUSINESS
Name METCALF, SHELTON
Address 1201 15TH STREET NW
SUITE 600
City-State-Zip: WASHINGTON DC 20005

Title VP
Name LOWRY, MICHAEL
Address 2200 ELLER DR
City-State-Zip: FORT LAUDERDALE FL 33316