

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

Page 19

PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # 139212 (5)

1. Corporation Name

ELDER MOVING & STORAGE CO.



Principal Place of Business 561 STEVENS ST JACKSONVILLE FL 32254 US	Mailing Address 9998 N MICHIGAN RD CARMEL IN 46032 US
--	--

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	3. Date Incorporated or Qualified 06/08/1940	3a. Date of Last Report 01/24/1995	4. FEI Number 59-0232173	Applied For Not Applicable
		5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required		
		6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees		
		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent C T CORPORATION SYSTEM %C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 \_\_\_\_\_ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS GRISHAM, MICHAEL J. 9998 N MICHIGAN ROAD CARMEL IN <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOD CARR, PATRICK F. 9998 N MICHIGAN ROAD CARMEL IN <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S IRVIN, ROBERT H. 9998 N MICHIGAN ROAD CARMEL IN <input checked="" type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T DODGE, LARRY W. 9998 N MICHIGAN ROAD CARMEL IN <input checked="" type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NORMAN, DENNIS C. 9998 N. MICHIGAN ROAD CARMEL IN <input checked="" type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS REICHERT, JAMES P. 9998 N. MICHIGAN ROAD CARMEL IN <input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 119.07(3)(k), 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: James P. Reichert April 8, 1996 317-875-1523  
Typed or printed name of signing officer or director Daytime Phone #

CR2E034 (12/95)

Page 2 of 2

**Directors of Mayflower Transit, Inc.**

A.Quinn Bell	5266 Highway Ave. Jacksonville, Florida 32254
Mike Greenblatt	1344 N.W. Blvd. Vineland, New Jersey 08360
Thomas T. Marshall	One Andrews Circle Brecksville, Ohio 44141
H. Daniel McCollister	1800 Route 130 North Burlington, New Jersey 08016
Charles G. McDaniel	4022 Jefferson Davis Hwy. Stafford, Virginia 22554
Clyde H. Springer	3927 Winchester Memphis, Tennessee 38118
Gerald P. Stadler	2481 Alton Avenue Irvine, California 92714
Kathy Clark	3680 Buffalo Road Rochester, New York 14624
David Henniecke	1530 Wrightwood Court Addison, Illinois 60101
Wendell Thornton	106 U.S. 117 Bypass South Goldsboro, North Carolina 27530
Don Reed	2500 Pacific Park Drive Whittier, California 90601