

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 820232

1. Corporation Name
CONSOLIDATED FREIGHTWAYS CORPORATION OF DELAWARE

Principal Place of Business
175 LINFIELD DRIVE
MENLO PARK CA 94025
US

Mailing Address
175 LINFIELD DRIVE
MENLO PARK CA 94025-3799
US

FILED
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90054 001 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/10/1967

4. FEI Number

94-1444797

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible

Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

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

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 D ☐ DELETE
NAME BLAKE, PATRICK H
STREET ADDRESS 175 LINFIELD DRIVE
CITY-ST-ZIP MENLO PARK CA

1.1 TITLE D/VP ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME WRIGHTSON, ROBERT E.
STREET ADDRESS 175 LINFIELD DRIVE
CITY-ST-ZIP MENLO PARK CA

2.1 TITLE D/VP ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE V ☒ DELETE
NAME MORREY, ROBERT J
STREET ADDRESS 175 LINFIELD DRIVE
CITY-ST-ZIP MENLO PARK CA

3.1 TITLE D/VP ☐ Change ☒ Addition
3.2 NAME Morrison, David F.
3.3 STREET ADDRESS 175 Linfield Drive
3.4 CITY-ST-ZIP Menlo Park, CA 94025

TITLE D ☐ DELETE
NAME CURRY, W R
STREET ADDRESS 175 LINFIELD DRIVE
CITY-ST-ZIP MENLO PARK CA

4.1 TITLE D/P/C ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME BLAKE, PATRICK H.
STREET ADDRESS 175 LINFIELD DRIVE
CITY-ST-ZIP MENLO PARK CA

5.1 TITLE D/VP ☒ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE VP ☒ DELETE
NAME JARVI, TOM C.
STREET ADDRESS 175 LINFIELD DRIVE
CITY-ST-ZIP MENLO PARK CA

6.1 TITLE D/VP ☐ Change ☒ Addition
6.2 NAME Richards, Stephen D.
6.3 STREET ADDRESS 175 Linfield Drive
6.4 CITY-ST-ZIP Menlo Park, CA 94025

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, with all other like empowered.

SIGNATURE:

Marjorie R. Fitch REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Fitch, VP & Secretary

3/10/99

650/326-1700

Date

Daytime Phone #

CR2E034 (11/98)

0555140