

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 827951**

1. Entity Name

OVERNITE TRANSPORTATION COMPANY**FILED**
Apr 19, 2001 8:00 am
Secretary of State

04-19-2001 90321 005 ***150.00

Principal Place of Business

**1000 SEMMES AVENUE
RICHMOND VA 23224-2246
US**

Mailing Address

**P O BOX 1216
RICHMOND VA 23209-1216
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **54-0481236**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**UNITED STATES CORPORATION COMPANY
1201 HAYES ST
SUITE 105
TALLAHASSEE FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	D	<input type="checkbox"/> Delete
NAME	DIGGS, HAROLD M	
STREET ADDRESS	1000 SEMMES AVENUE	
CITY-ST-ZIP	RICHMOND VA 23224	
TITLE	SRV	<input type="checkbox"/> Delete
NAME	MACKENZIE, GORDON S	
STREET ADDRESS	1000 SEMMES AVENUE	
CITY-ST-ZIP	RICHMOND VA 23224-2246	
TITLE	CEO	<input type="checkbox"/> Delete
NAME	SUGGS, LEO H	
STREET ADDRESS	1000 SEMMES AVENUE	
CITY-ST-ZIP	RICHMOND VA	
TITLE	D	<input type="checkbox"/> Delete
NAME	DAVIDSON, RICHARD K	
STREET ADDRESS	1717 MAIN STREET, SUITE 5900	
CITY-ST-ZIP	DALLAS TX 75201	
TITLE	SRVP	<input type="checkbox"/> Delete
NAME	HANLEY, PATRICK D	
STREET ADDRESS	1000 SEMMES AVENUE	
CITY-ST-ZIP	RICHMOND VA	
TITLE	S	<input type="checkbox"/> Delete
NAME	MCKNIGHT, LISA B.	
STREET ADDRESS	1000 SEMMES AVENUE	
CITY-ST-ZIP	RICHMOND VA 23224	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Harold M Diggs*

HAROLD M. DIGGS

4/6/01

(804) 231-8228

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)