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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 858

855148

(3)

Mailing Address

OLD DOMINION FREIGHT LINE, INC.

FILED Apr 24 1998 8:00am Secretary of State



1730 WESTCHESTER DR HIGH POINT NO 27262-7007		1730 WESTCHESTER DR HIGH POINT NC 27262-7007				DO NOT WRITE IN THIS SPACE	
	. —.					3. Date Incorporated or Qualified 12/31/1982	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For	
21		26				56-0751714 Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				SQ 75 Additional	
22		27				5. Certificate of Status Desired Fee Required	
City & State		Cily & State	City & State			6. Election Campaign Financing \$5.00 May Be	
23		28				Trust Fund Contribution Added to Fees	
Zip	Country	Zφ	Coun	Country		8. This corporation owes or has paid the current year Intangible	
24	25	29	30	30		Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered Agent	
CT	CORPORATION SYSTEM		8	31	Name		
1200 S. PINE ISLAND ROAD				82 Street Address (P.O. Box Number is Not Acceptable)			
	ANTATION FL 33324			26	Street A	Address (P.O. Box Number is Not Acceptable)	
	WALLES OF STREET		ε	33			
	•						
			8	34	City	FL 85 Zip Code	
11 Purcuant	to the provisions of Costions 607.05	02 and 607 1609 Fiorida Ctar	ulon the ob-	1	nomad		
office or r	egistered agent, or both, in the State	e of Florida. Such change was	utes, the abo s authorized	by.	the corp	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered	
agent. I a	m f am iliar with, and accept the oblic	yations of, Section 607.0505, F	Florida Statu	ies.		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
SIGNATURE							
12.	Signature, typod or profed name of regis tered ag	ND DIRECTORS		(gen	il signature i	e required when reinslating) DATE	
TITLE	S OFFICE NS AN	DELETE	13.		т	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
i	•	□ nereit	1.1 TITLE			Change Addition	
NAME	MCCARTY, J.B. JR.		1.2 NAM				
STREET ADDRESS	1730 WESTCHESTER DR		1.3 STREET ADDRESS		ADDRESS		
CITY-\$T-ZIP	HIGH POINT NC		1.4 CITY		- ZIP		
TITLE	_		2.1 TITU	E		☐ Change ☐ Addition	
NAME	FRYE, J. W.		2.2 NAM	2.2 NAME 2.3 STREET ADDRESS			
STREET ADDRESS	1730 WESTCHESTER DR		2.3 STRE				
CITY-ST-ZIP	HIGH POINT NC		2. 4 CITY	r-st	- ZIP		
TITLE			3.1 THE	1		Change Addition	
NAME	CONGDON, EARL E		3.2 NAM	E			
STREET ADDRESS	1730 WESTCHESTER DR		33 STRE	ET A	DDRESS		
CITY-ST-ZIP	HIGH POINT NC		3.4. CITY	(-\$T	- ZiP		
TITLE	<u> </u>	DELETE	4 1 TITLE			DRES Grange Addition	
NAME	CONGDON, DAVID S		4 2 NAN	ΛÉ		DAVID S. CONGDON	
STREET ADDRESS	1730 WESTCHESTER DR		4.3 STRE				
CITY-ST-ZIP	HIGH POINT NO		4.4 CITY				
TITLE	PD	DELETE	5.1 TITLE		-"-	DIRECTOR Change Addition	
NAME	BBELING, JOHN		5.2 NAM		- [,	JOHN EBELING	
STREET ADDRESS	1730 WESTCHESTER DR		5.3 STRE			1700 CDEMING	
	HIGH POINT NO						
CITY-ST-ZIP TITLE	AVPC	DELETE	5.4 CITY			VP/colono Addition	
	BOOKER, JOHN P	LI VELETE	6.1 TITLE			OT / COM TRUCTOR	
NAME			6.2 NAM			JOHN P. BOOKER	
STREET ADDRESS	1730 WESTCHESTER DR		6.3 STRE	ET A	ODRESS		
	serata tirilkir Alf'		-			T	

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 13 if changed, grown attachment with an address.