

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # F00000002770

1. Entity Name

NEW LOGISTICS HOLDINGS CORP.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

1301 Riverplace Blvd.

Suite, Apt. #, etc.
1200

City & State
Jacksonville, FL

Zip
32207

Country
USA

3. Mailing Address

1111 Broadway

Suite, Apt. #, etc.
6TH FL.

City & State
Oakland, CA

Zip
94067

Country
USA

4. FEI Number

5222 41039

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name
CORPORATION SERVICE COMPANY

Street Address (P.O. Box Number is Not Acceptable)
1701 HAYS ST.

City
TALLAHASSEE

FL

Zip Code
32301

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.

Corporation Service Company

SIGNATURE

Bobbie Hall

By: Bobbie Hall

7/12/2002

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

(NOTE: Registered Agent signature required when reissuing)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-STATE-ZIP	President and CEO Richard M. Metzler 1111 Broadway Oakland, CA 94607
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Treasurer and Controller Neal E. West 1111 Broadway Oakland, CA 94607
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Secretary Ann F. Hesse 1111 Broadway Oakland, CA 94607
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP William Villalon 1111 Broadway Oakland, CA 94607
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	VP Mike Gardner 1111 Broadway Oakland, CA 94607
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	Asst. Secretary Timothy J. Windle 1111 Broadway Oakland, CA 94607

**DO NOT WRITE
IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Douglas Cannon

DOUGLAS CANNON

4/26/02

510-272-8000

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number

FILED

02 JUL 17 AM 10:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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