

**2001 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # F00000003975**

1. Entity Name

**CF AIRFREIGHT CORPORATION****FILED**  
**May 16, 2001 8:00 am**  
**Secretary of State**

05-16-2001 90050 013 \*\*\*150.00

8

Principal Place of Business

**750 SOUTH PLAZA DRIVE, SUITE 323  
MENDOTA HEIGHTS MN 55120**

Mailing Address

**750 SOUTH PLAZA DRIVE, SUITE 323  
MENDOTA HEIGHTS MN 55120**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number **93-1294381**

Applied For

Not Applicable

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE FL 32301-2525**

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 State**10. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **CD** ☐ Delete  
NAME **BLAKE, PATRICK H**  
STREET ADDRESS **175 LINFIELD DRIVE**  
CITY-ST-ZIP **MENLO PARK CA 94025-3799**TITLE ☒ Change ☐ Addition  
NAME **16400 SE CF WAY**  
STREET ADDRESS **VANCOUVER WA 98683**  
CITY-ST-ZIPTITLE **VTD** ☒ Delete  
NAME **BHARDWAJ, SUNIL**  
STREET ADDRESS **175 LINFIELD DRIVE**  
CITY-ST-ZIP **MENLO PARK CA 94025-3799**TITLE **PD** ☐ Change ☒ Addition  
NAME **MCCRADY, SR., RICHARD D**  
STREET ADDRESS **750 S PLAZA DRIVE**  
CITY-ST-ZIP **MENDOTA HEIGHTS MN 55120**TITLE **VSD** ☐ Delete  
NAME **FITCH, MARYLA R**  
STREET ADDRESS **175 LINFIELD DRIVE**  
CITY-ST-ZIP **MENLO PARK CA 94025-3799**TITLE ☒ Change ☐ Addition  
NAME **16400 SE CF WAY**  
STREET ADDRESS **VANCOUVER WA 98683**  
CITY-ST-ZIPTITLE **VASD** ☐ Delete  
NAME **RICHARDS, STEPHEN D**  
STREET ADDRESS **175 LINFIELD DRIVE**  
CITY-ST-ZIP **MENLO PARK CA 94025-3799**TITLE ☒ Change ☐ Addition  
NAME **16400 SE CF WAY**  
STREET ADDRESS **VANCOUVER WA 98683**  
CITY-ST-ZIPTITLE **V** ☐ Delete  
NAME **WRIGHTTSON, ROBERT E**  
STREET ADDRESS **175 LINFIELD DRIVE**  
CITY-ST-ZIP **MENLO PARK CA 94025-3799**TITLE ☒ Change ☐ Addition  
NAME **16400 SE CF WAY**  
STREET ADDRESS **VANCOUVER WA 98683**  
CITY-ST-ZIPTITLE **AT** ☐ Delete  
NAME **MORGAN, KERRY**  
STREET ADDRESS **1621 N.W. 21ST AVENUE**  
CITY-ST-ZIP **PORTLAND OR 97209-1797**TITLE **VT** ☒ Change ☐ Addition  
NAME **16400 SE CF WAY**  
STREET ADDRESS **VANCOUVER WA 98683**  
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:

*Maryla R Fitch*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-30-01

360-448-4286

CR2E034 (10/00)