## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F00000007148

Name:

Address: City-St-Zip: SHEVEL, MYRON P

ELIZABETH, NJ 07201

1 N AVE E

Entity Name: NEW ENGLAND MOTOR FREIGHT, INC.

FILED Jan 19, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 1-71 NORTH AVENUE EAST ELIZABETH, NJ 07201 **Current Mailing Address: New Mailing Address:** 1-71 NORTH AVENUE EAST ELIZABETH, NJ 07201 FEI Number: 22-1977697 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323010000 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition EISENBERG, CRAIG Name: Name: 1-71 NORTH AVE EAST Address: Address: City-St-Zip: ELIZABETH, NJ City-St-Zip: Title: STD Title: () Delete () Change () Addition Name: BLAKEMAN, NANCY S Name: 1-71 NORTH AVE EAST Address: Address: City-St-Zip: ELIZABETH. NJ City-St-Zip: Title: Title: CD ( ) Delete () Change () Addition SHEVELL, MYRON Name: Name: 1-71 NORTH AVE EAST Address: Address: City-St-Zip: ELIZABETH, NJ City-St-Zip: Title: VD (X) Delete Title: () Change () Addition SHEVELL, JON Name: Name: Address: 1-71 NORTH AVE EAST Address: City-St-Zip: ELIZABETH, NJ City-St-Zip: Title: COB Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: CRAIG EISENBERG VP 01/19/2009