

**2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# F01000001102

**FILED**  
**Jun 21, 2007**  
**Secretary of State****Entity Name:** ABLEST INC.**Current Principal Place of Business:**1511 NORTH WESTSHORE BLVD  
SUITE 900  
TAMPA, FL 33607**New Principal Place of Business:****Current Mailing Address:**1511 NORTH WESTSHORE BLVD  
SUITE 900  
TAMPA, FL 33607**New Mailing Address:****FEI Number:** 65-0978462**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: CBD ( ) Delete  
Name: HEIST III, CHARLES H  
Address: 1511 NORTH WESTSHORE BLVD SUITE 900  
City-St-Zip: TAMPA, FL 33607

Title: D ( ) Delete  
Name: FOSTER, W. DAVID  
Address: 1511 NORTH WESTSHORE BLVD SUITE 900  
City-St-Zip: TAMPA, FL 33607

Title: PCEO (X) Delete  
Name: MOORE, KURT R  
Address: 1511 NORTH WESTSHORE BLVD SUITE 900  
City-St-Zip: TAMPA, FL 33607

Title: VHRS (X) Delete  
Name: GARDNER, NOLAN  
Address: 1511 NORTH WESTSHORE BLVD SUITE 900  
City-St-Zip: TAMPA, FL 33607

Title: D (X) Delete  
Name: MOORE, DONNA R  
Address: 1511 NORTH WESTSHORE BLVD SUITE 900  
City-St-Zip: TAMPA, FL 33607

Title: VCFO (X) Delete  
Name: HORAN, JOHN  
Address: 1511 N WESTSHORE BLVD STE 900  
City-St-Zip: TAMPA, FL 33607

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: SORENSEN, D. S  
Address: 1511 NORTH WESTSHORE BLVD SUITE 900  
City-St-Zip: TAMPA, FL 33607

Title: SEC (X) Change ( ) Addition  
Name: MITCHELL, JEFF  
Address: 1511 NORTH WESTSHORE BLVD SUITE 900  
City-St-Zip: TAMPA, FL 33607

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: JEFF MITCHELL

SEC

06/21/2007

Electronic Signature of Signing Officer or Director

Date