

**2003 FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jan 15, 2003 8:00 am**  
**Secretary of State**

01-15-2003 90308 039 \*\*\*150.00

**DOCUMENT # F01000006469**

1. Entity Name  
**MV TRANSPORTATION, INC. OF CALIFORNIA**



Principal Place of Business  
**360 CAMPUS LANE  
SUITE 201  
FAIRFIELD CA 94585**

Mailing Address  
**360 CAMPUS LANE  
SUITE 201  
FAIRFIELD CA 94585**



CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **94-2491705**

Applied For  
Not Applicable

Zip Country

Zip Country

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

**RAEDEMACHER, MICHAEL  
5711 RICHARD AVENUE  
JACKSONVILLE FL 32207**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2003 Fee will be \$550.00**  
**Make Check Payable to Florida Department of State**

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

| 10. OFFICERS AND DIRECTORS                     |  | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 |  |
|--|--|---|--|
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>C</b><br><b>LODDE, ALEXIS</b><br>420 EXECUTIVE COURT, NORTH, SUITE G<br>FAIRFIELD CA 94585 <input type="checkbox"/> Delete    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>C00</b><br><b>Kevin KhKa</b><br>See Att. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition             |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>D</b><br><b>LODDE, FEYSAN</b><br>420 EXECUTIVE COURT, NORTH, SUITE G<br>FAIRFIELD CA 94585 <input type="checkbox"/> Delete    | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <b>V.P. Bus Dev.</b><br><b>Keith whalen</b><br>See Att. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>P</b><br><b>MONSON, JON</b><br>420 EXECUTIVE COURT, NORTH, SUITE G<br>FAIRFIELD CA 94585 <input type="checkbox"/> Delete      | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>S</b><br><b>BIARD, JON</b><br>420 EXECUTIVE COURT, NORTH, SUITE G<br>FAIRFIELD CA 94585 <input type="checkbox"/> Delete       | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>V</b><br><b>RICHARDSON, GARY</b><br>420 EXECUTIVE COURT, NORTH, SUITE G<br>FAIRFIELD CA 94585 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | <b>V</b><br><b>SMITH, DAVID</b><br>420 EXECUTIVE COURT, NORTH, SUITE G<br>FAIRFIELD CA 94585 <input type="checkbox"/> Delete     | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        | <input type="checkbox"/> Change <input type="checkbox"/> Addition  |

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE: SIGNATURE REQUIRED** *[Signature]* **1/9/03** **707.863.8980**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)

Attachment # FO1000006469

MV TRANSPORTATION, INC.  
LIST OF DIRECTORS AND OFFICERS

20008809

DIRECTORS

Alexis Lodde, Chairman  
535-44-9376  
DOB November 24, 1947  
1360 Webster Street  
San Francisco, CA. 94118

Jon Monson  
565-21-2573  
DOB April 6, 1959  
3572 Congressional Circle  
Fairfield, CA. 94533

Feysan Lodde  
560-86-0680  
DOB December 15, 1948  
1360 Webster Street  
San Francisco, CA. 94118

OFFICERS

Jon Monson, CEO  
565-21-2573  
DOB April 6, 1959  
3572 Congressional Circle  
Fairfield, CA. 94533

John Biard, General Council/Secretary  
553-65-7034  
DOB January 18, 1963  
394 Trailview Circle  
Martinez, CA. 94553

Kevin Klika, Chief Operating Officer  
397-84-2675  
DOB November 29, 1966  
6 Epperson Court  
Woodland, CA. 95776

David Smith, Vice President of Human Relations  
559-78-2251  
DOB October 10, 1963  
280 Silver Eagle Drive  
Vacaville, CA. 95688

Gary Richardson, CFO  
416-64-2535  
DOB July 11, 1963  
2474 Bay Hill Circle  
Fairfield, CA. 94533

Keith Whalen, Vice President Business Development  
504-72-4810  
DOB September 11, 1969  
361 Kingsberry Circle  
Vacaville, CA. 95687