2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001644

Entity Name: 4 E LOGISTICS INC

Title:

Name:

Address:

City-St-Zip:

FILED Apr 09, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1802 NORTH ALAFAYA TRAIL SUITE 121 ORLANDO, FL 32826 **Current Mailing Address: New Mailing Address:** 1802 NORTH ALAFAYA TRAIL SUITE 121 ORLANDO, FL 32826 FEI Number: 20-3925652 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: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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 STEWART, PAUL Name: Name: 8469 WOODBRIAR Address: Address: City-St-Zip: GERMANTOWN, TN 38138 City-St-Zip: Title: Title: () Delete () Change () Addition Name: STEWART, PAUL Name: 8469 WOODBRIAR Address: Address: GERMANTOWN, TN 38138 City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition () Delete SVP MILLARD, GARY MILLARD, GARY Name: Name: 1802 NORTH ALAFAYA TRAIL #121 1802 NORTH ALAFAYA TRAIL #121 Address: Address: City-St-Zip: ORLANDO, FL 32826 City-St-Zip: ORLANDO, FL 32826

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.

Title:

Name:

Address:

City-St-Zip:

SVP

SMITH, WES

2221 ELDGE LAKE DR #180

CHARLOTTE, NC 28217

(X) Change () Addition

SIGNATURE: GARY MILLARD SVP 04/09/2009

() Delete

2221 ELDGE LAKE DR #180

CHARLOTTE, NC 28217

SMITH, WES