

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F94000002274

1. Entity Name

AMERICAN AUTO CARRIERS INC.

**FILED**  
**May 26, 2000 8:00 am**  
**Secretary of State**

05-26-2000 90036 008 \*\*\*150.00

Principal Place of Business

Mailing Address

BLOUT ISLAND BLVD  
JACKSONVILLE FL 32226

ATTN: VICE PRESIDENT ACCOUNTING  
188 BROADWAY  
WOODCLIFF LAKE NJ 07675-8067  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

13-3498025

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

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

LEON, DANIEL  
% WALLINIUS LINES NORTH AMERICA, INC.  
9550 REGENCY SQUARE BLVD., SUITE 1107  
JACKSONVILLE FL 32225

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, 2000 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 CPD ☐ Delete

NAME EBELING, RAYMOND P  
STREET ADDRESS 188 BROADWAY  
CITY-ST-ZIP WOODCLIFF LAKE NJ 07675-1232

TITLE VT ☒ Delete

NAME CLEMENT, JAMES P.  
STREET ADDRESS 188 BROADWAY  
CITY-ST-ZIP WOODCLIFF LAKE NJ 07675

TITLE VD ☐ Delete

NAME RYAN, ANTHONY M.  
STREET ADDRESS 188 BROADWAY  
CITY-ST-ZIP WOODCLIFF LAKE NJ 07675-1232

TITLE S ☐ Delete

NAME RIDLON, JOHN M.  
STREET ADDRESS 188 BROADWAY  
CITY-ST-ZIP WOODCLIFF LAKE NJ 07675

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition

NAME  
STREET ADDRESS 85 Chestnut Ridge Rd  
CITY-ST-ZIP Montvale NJ 07645

TITLE ☐ Change ☒ Addition

NAME Kenneth T Quinn  
STREET ADDRESS 85 Chestnut Ridge Rd.  
CITY-ST-ZIP Montvale NJ 07645

TITLE ☒ Change ☐ Addition

NAME  
STREET ADDRESS 85 Chestnut Ridge Rd  
CITY-ST-ZIP Montvale NJ 07645

TITLE ☒ Change ☐ Addition

NAME  
STREET ADDRESS 85 Chestnut Ridge Rd.  
CITY-ST-ZIP Montvale NJ 07645

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME  
STREET ADDRESS  
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:

*René H. T. Quinn*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/99)