2002 UNIFORM BUSINESS REPORT (UBR)

May 06, 2002 8:00 am § Secretary of State DOCUMENT # F95000001152 1. Entity Name 05-06-2002 90229 026 ***150.00 CONTRACT TRANSPORTATION SYSTEMS CO. Principal Place of Business Mailing Address 101 PROSPECT AVE. NW 101 PROSPECT AVE. NW **CLEVELAND OH 44115 CLEVELAND OH 44115** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 34-1322942 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BAXTER, JOEL Street Address (P.O. Box Number is Not Acceptable) 119 LAKE MARIAM WAY WINTER HAVEN FL 33884 Zip Code City FL 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) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After May 1, 2002 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE ☐ Change Addition CONNOR, C.M. NAME STREET ADDRESS 101 PROSPECT AVE., NW STREET ADDRESS CITY-ST-ZIE **CLEVELAND OH 44115** CITY-ST-ZIP VPAT TITLE **Addition** Detete TITLE Change Sean Hennessu NAME PITORAK, L.J. NAME STREET ADDRESS 101 PROSPECT AVE., NW STREET ADDRESS CITY-ST-ZIP CLEVELAND OH CITY-ST-ZIP TITLE ☐ Delete TITLE ☑ Addition -- Change NAME SGAMBELLONE, JAMES J STREET ADDRESS 101 PROSPECT AVE., NW STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **CLEVELAND OH 44115** TITLE S ☐ Delete TITLE ☐ Change ☐ Addition STELLATO, L.E. NAME NAME STREET ADDRESS 101 PROSPECT AVE., NW STREET ADDRESS CITY-ST-ZIP **CLEVELAND OH 44115** CITY-ST-7IP TITLE CE0 TITLE ☐ Delete Change ■ Addition SCAMINACE, J.M. NAME STREET ADDRESS 101 PROSPECT AVE., NW STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CLEVELAND OH 44115 ☐ Delete TITLE TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP I hereby certify that the information supplied with/his/filling 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 the indicated 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 in sustee employeed do 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 an address, with all other like empowered.

SIGNATURE:

TED NAME OF SIGNING OFFICER OR DIRECTOR

FILED