

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 13, 2003 8:00 am
Secretary of State

01-13-2003 90848 001 ***150.00

DOCUMENT # F95000003326

1. Entity Name
FEDEX FREIGHT EAST, INC.



Principal Place of Business
**2200 FORWARD DR
HARRISON AR 72601**

Mailing Address
**2200 FORWARD DR
HARRISON AR 72601**

90001850



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 **71-0562003**

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

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
1200 SOUTH PINE ISLAND RD.
PLANTATION FL 33324**

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

Signature, typed or printed name of registered agent and title if applicable.

(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 NAME STREET ADDRESS CITY-ST-ZIP	S REEVES, KEN 2200 FORWARD DR HARRISON AR 72601	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT CONNER, FRANK 2200 FORWARD DR HARRISON AR	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARRISON, TOM 2200 FORWARD DR HARRISON AR	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DUNCAN, DOUGLAS G 6075 POPLAR AVE. MEMPHIS TN 38119	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, DOUGLAS C 6075 POPLAR AVE. MEMPHIS TN 38119	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BEAL, DENNIS 2200 FORWARD DR HARRISON AR	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Patrick Reed 2200 Forward Drive Harrison AR 72601	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Frank Conner

1-8-03

870-741-9000

Date

Daytime Phone #