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May 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F96000003690 (2)

1. Corporation Name  
LAIDLAW TRANSIT SERVICES, INC.



Principal Place of Business  
3221 N. SERVICE RD.  
BURLINGTON ONTARIO L7R 3Y8

Mailing Address  
3221 N. SERVICE RD.  
BURLINGTON ONTARIO L7R

3. Date Incorporated or Qualified  
07/22/1996

3a. Date of Last Report

4. FEI Number  
52-1929641

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country

8. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	GRAINGER, JOHN R	1.2 NAME	
STREET ADDRESS	3221 N. SERVICE RD.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BURLINGTON ONTARIO L7R 3Y8	1.4 CITY-ST-ZIP	
TITLE	S	2.1 TITLE	S
NAME	BYRNE, ROBERT H	2.2 NAME	Dick van Wyck
STREET ADDRESS	3221 N. SERVICE RD.	2.3 STREET ADDRESS	3221 North Service Road
CITY-ST-ZIP	BURLINGTON ONTARIO L7R 3Y8	2.4 CITY-ST-ZIP	Burlington, ON L7R 3Y8
TITLE	V	3.1 TITLE	
NAME	FORSAYETH, MICHAEL	3.2 NAME	
STREET ADDRESS	3221 N. SERVICE RD.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BURLINGTON ONTARIO L7R 3Y8	3.4 CITY-ST-ZIP	
TITLE	V	4.1 TITLE	
NAME	KEIPER, STEPHEN	4.2 NAME	
STREET ADDRESS	12301 WILSHIRE BLVD., #505	4.3 STREET ADDRESS	
CITY-ST-ZIP	LOS ANGELES CA 90025	4.4 CITY-ST-ZIP	
TITLE	V	5.1 TITLE	
NAME	YATES, WILLIAM	5.2 NAME	
STREET ADDRESS	5380 COLLEGE BLVD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	OVERLAND PARK KS 66211	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Dick van Wyck 4/15/97 (905) 336-1800

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0520798

CR2E034 (9/96)