


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2007 8:00 am
Secretary of State

04-30-2007 90820 029 ***150.00

DOCUMENT # F96000005559 1. Entity Name ABF FREIGHT SYSTEM, INC.					
Principal Place of Business 3801 OLD GREENWOOD RD FT. SMITH, AR 72903 US			Mailing Address PO BOX 10048 FT. SMITH, AR 72917-0048		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 71-0249444	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when renouncing) <small>Signature, typed or printed name of registered agent and title if applicable. DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	V REYNOLDS, DONALD N 3801 OLD GREENWOOD RD. FT. SMITH, AR 72903 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	- See attached - <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LYNCH, ARTHUR N 3801 OLD GREENWOOD RD. FT. SMITH, AR 72903 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V James W. Keenan 3801 Old Greenwood Road Fort Smith, AR 72903 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V KEMP, WESLEY B 3801 OLD GREENWOOD RD. FT. SMITH, AR 72903 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV MORTON, J. LAVON 3801 OLD GREENWOOD RD. FT. SMITH, AR 72903 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <i>J. Lavon Morton</i> J. Lavon Morton					
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date 4-23-07 Daytime Phone 479-785-6007	

40054100



04122007 Chg-P CR2E034 (12/06)

Applied For
Not Applicable

8.75 Additional Fee Required

FL Zip Code

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

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
V
REYNOLDS, DONALD N
3801 OLD GREENWOOD RD.
FT. SMITH, AR 72903 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
- See attached - ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
LYNCH, ARTHUR N
3801 OLD GREENWOOD RD.
FT. SMITH, AR 72903 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
James W. Keenan
3801 Old Greenwood Road
Fort Smith, AR 72903 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
V
KEMP, WESLEY B
3801 OLD GREENWOOD RD.
FT. SMITH, AR 72903 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AV
MORTON, J. LAVON
3801 OLD GREENWOOD RD.
FT. SMITH, AR 72903 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *J. Lavon Morton* J. Lavon Morton Date **4-23-07** Daytime Phone **479-785-6007**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

bb Ac

ATTACHMENT

ABF Freight System, Inc.
Officers & Directors

40092196
#F96000005559

11. ADDITIONS

TITLE	NAME	BUSINESS ADDRESS
CD/P	Robert A. Davidson	3801 Old Greenwood Rd. Fort Smith, AR 72903
V	Walter Echols	3801 Old Greenwood Rd. Fort Smith, AR 72903
V/T	Barry C. Hunter	3801 Old Greenwood Rd. Fort Smith, AR 72903
V	Christopher Burton	3801 Old Greenwood Rd. Fort Smith, AR 72903
V	Murray Babb	3801 Old Greenwood Rd. Fort Smith, AR 72903
V	Shannon Lively	3801 Old Greenwood Rd. Fort Smith, AR 72903
V	James Ingram	3801 Old Greenwood Rd. Fort Smith, AR 72903
V	Roy M. Slagle	3801 Old Greenwood Rd. Fort Smith, AR 72903
V	A.J. Phillips	3801 Old Greenwood Rd. Fort Smith, AR 72903
V	Chris Baltz	3801 Old Greenwood Rd. Fort Smith, AR 72903
V	Gary Hunt	3801 Old Greenwood Rd. Fort Smith, AR 72903
D/S	Michael Johns	3801 Old Greenwood Rd. Fort Smith, AR 72903
AS	Richard L. Spearman	3801 Old Greenwood Rd. Fort Smith, AR 72903
D/AT	Judy R. McReynolds	3801 Old Greenwood Rd. Fort Smith, AR 72903
AT	David R. Cobb	3801 Old Greenwood Rd. Fort Smith, AR 72903
Controller	Frank H. Ward	3801 Old Greenwood Rd. Fort Smith, AR 72903