SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F9600006836 (8)

FREIGHT HANDLERS, INC.

Principal Place	e of Business	Mair	Mailing Address				T SOURCE THE COSTO BISH ONLY ONLY BOTH ONLY ONLY ONLY ONLY ONLY ONLY ONLY ONLY
320 W RANSON ST FUQUAY-VARINA NC 27526			320 W RANSON ST FUOUAY-VARINA NC 27526				DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified 3a. Date of Last Report 12/23/1996
2. Principal Pi	lace of Business		2a. Mailing Address				4. FEI Number Applied For
21							56-1741462 Not Applicable
Suite, Apt.		27					5. Certificate of Status Desired
City & State	9	28					6. Election Campeign Financing \$5.00 May Bo Trust Fund Contribution Added to Fees
Zip	Country		^{շտ} 27526		ountry USA		8. This corporation owes or has paid the current year Intangible
24	25 2. Name and Address of Currer	2.0		30	USA		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
		<u>-</u>	sred Agent		81	Name	
	rporation service compan' 1 hays street	τ					
	LAHASSEE FL 32301-2525				82	Street	t Address (P.O. Box Number is Not Acceptable)
IAU	CAT MODEL 1 E 0200 1-2020				83		
						0:1	■ 85 Zip Code
					84	City	FL 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	Signature, typed or printed name of registered ag	tent and tille if	Loppicable (NOTE: Registe	red Apr	ini signatur	re required when reinstating) DATE
12.	OFFICERS AN			1:		- Language	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DC		DELETE	1.1	TITLE		Change Addition
NAME	WALL, CHARLES W			1.2	NAME		
STREET ADDRESS	320 W RANSON ST			1.3	STREET	ADDRESS	
CITY-ST-ZIP	FUQUAY-VARINA NC 27526				CITY-S	T - ZIP	
TITLE	CEO		☐ DELETE		1ITLE		Change
NAME	WALL, CHARLES W				NAME		
STREET ADDRESS	320 W RANSON ST			1		ADDRESS	
CITY-ST-ZIP	FUQUAY-VARINA NC 27526		DELETE		4 CITY-1	ST - ZiP	Change Addition
TITLE	WALL, JAYNE E		L' DELETE		THE		Orange Auditor
NAME	320 W RANSON ST				NAME	ADDRESS	
STREET ADDRESS	FUQUAY-VARINA NC 27526				i. Citya:		`
CITY-ST-ZIP TITLE	V		DELETE		TITLE	31-211	Change Addition
NAME	SNIPES, RUSSELL G				2 NAME		
STREET ADDRESS	320 W RANSON ST					ADDRESS	
CITY-ST-ZIP	FUQUAY-VARINA NC 27526				CITY-S		
TITLE	8		DELETE		TITLE		Change Addition
NAME	SNIPES, FRANCES C			5.7	NAME		
STREET ADDRESS	320 W RANSON ST			5.3	STREET	ADDRESS	
CITY-ST-ZIP	FUQUAY-VARINA NC 27526			5.4	4 CITY - S	ST-ZIP	
TITLE			DELETE	6	TITLE		V Change X Addition
NAME				6:	NAME		MEIERHOEFER, ERIC
STREET ADDRESS				63	STREET	address	
CITY-ST-ZIP				6	CITY-S	51 - ZIP	Fuquay-Varina, NC 27526
14. I do herel	by certify that the Mormation supplies	ed with thi	s filing does not q	ualify for this true an	ne exe	emption	stated in Section 119.07(3)(i), Florida Statutes I further certify that the dt that my signature shall have the same legal effect as if made under oath; that country is a state of the same legal effect as if made under oath; that country is a state of the same legal effect as if made under oath; that
l am an o	officer or director of the corporation of	or the reco	civor or truster om	powered t	0 6x0	cule this	report as required by Chapter 607, Florida Statutes; and that my name

ONATURE. AUNILLA THE STATE OF LAND Elizabeth Wall Proceedent

(010)550 0157

FILED

Aug 13 1997 8:00am

Secretary of State