## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# F96000006836

Entity Name: FREIGHT HANDLERS, INC.

FILED Mar 11, 2003 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 310 N JUDD PKWY FUQUAY-VARINA, NC 27526 LIS **Current Mailing Address: New Mailing Address:** PO BOX 546 FUQUAY-VARINA, NC 27526 US FEI Number: 56-1741462 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 US 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition WALL, CHARLES W Name: Name: 310 N JUDD PKWY Address: Address: City-St-Zip: FUQUAY-VARINA, NC 27526 City-St-Zip: Title: Title: () Delete () Change () Addition Name: WALL, CHARLES W Name: 310 N JUDD PKWY Address: Address: FUQUAY-VARINA, NC 27526 City-St-Zip: City-St-Zip: Title: Title: DP ( ) Delete () Change () Addition WALL, JAYNE E Name: Name: 310 N JUDD PKWY Address: Address: City-St-Zip: FUQUAY-VARINA, NC 27526 City-St-Zip: Title: () Delete Title: () Change () Addition SNIPES, RUSSELL G Name: Name: Address: 310 N JUDD PKWY Address: City-St-Zip: FUQUAY-VARINA, NC 27526 City-St-Zip: Title: Title: () Delete () Change () Addition SNIPES, FRANCES C Name: Name: 310 N JUDD PKWY Address: Address: FUQUAY-VARINA, NC 27526 City-St-Zip: City-St-Zip: Title: () Delete Title: (X) Change ( ) Addition MEIERHOEFER, ERIC Name: Name: WALL, TAL 310 N JUDD PKWY 310 N JUDD PKWY Address: Address: City-St-Zip: FUQUAY VARINA, NC City-St-Zip: FUQUAY VARINA, NC 27526

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TAL WALL V 03/11/2003