2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F97000003850 1. Entity Name FILED AVERITT EXPRESS, INC. 00 MAY -2 PM 12: 46 Principal Place of Business Mailing Address SECRETARY OF STATE PO BOX 3166 518 OLD KENTUCKY RD TALLAHASSEE, FLORIDA PERIMETER PLACE ONE COOKEVILLE TN 38502-3166 COOKEVILLE TN 38502-3166 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 62-0755421 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent م د استان Name C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 City 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 SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. CCFO ☐ Addition TITLE ☐ Delete TITLE SASSER, GARY D NAME NAME 518 OLD KENTUCKY RD, PERIMETER PLACE ONE STREET ADDRESS STREET ADDRESS COOKEVILLE TN 38502-3166 CITY-ST-ZIE CITY-ST-7IP TITLE ☐ Delete TITLE SASSER, GARY D NAME NAME -05/16/00--01029---004 518 OLD KENTUCKY RD, PERIMETER PLACE ONE STREET ADDRESS STREET ADDRESS ****350.00 ****150.00 COOKEVILLE TN 38502-3166 CITY-ST-ZIP CITY-ST-ZIP VCV ☐ Delete Change ☐ Addition TITLE TITLE SPAIN, WAYNE NAME -NAME 518 OLD KENTUCKY RD, PERIMETER PLACE ONE STREET ADDRESS STREET ADDRESS COOKEVILLE TN 38502-3166 CITY-ST-ZIP CITY-ST-ZIP 000 TITLE TITLE ☐ Change Addition SPAIN, WAYNE NAME NAME 518 OLD KENTUCKY RD, PERIMETER PLACE ONE STREET ADDRESS STREET ADDRESS **COOKEVILLE TN 38502-3166** CITY-ST-ZIP CITY-ST-ZIP **CFOV** ☐ Delete ☐ Change Addition TITLE JOHNSON, GEORGE NAME 518 OLD KENTUCKY RD, PERIMETER PLACE ONE STREET ADDRESS STREET ADDRESS COOKEVILLE TN 38502-3166 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change JOHNSON, GEORGE NAME NAME 518 OLD KENTUCKY RD, PERIMETER PLACE ONE STREET ADDRESS STREET ADDRESS COOKEVILLE TN 38502-3166 CITY-ST-ZIP CITY-ST-ZIP 13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

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4/26/00 Davime Phone 8

SIGNATURE: