

# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Feb 06, 2003 8:00 am**  
**Secretary of State**

02-06-2003 90059 003 \*\*\*150.00

**DOCUMENT # F97000004653**

1. Entity Name  
**SAFE RIDE SERVICES, INC.**



Principal Place of Business  
**5360 COLLEGE BLVD  
STE 200  
OVERLAND PARK KA 66211**

Mailing Address  
**3221 NORTH SERVICE RD  
BURLINGTON ON L7R 3Y8**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**86-0644802**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM  
1200 SO PINE ISLAND RD  
PLANTATION FL 33324**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**

**After May 1, 2003 Fee will be \$550.00**

**Make Check Payable to Florida Department of State**

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 **D** ☐ Delete  
NAME **GRAINGER, JOHN R**  
STREET ADDRESS **3221 N SERVICE RD**  
CITY-ST-ZIP **BURLINGTON ONTARIO L7R 3Y**

TITLE **PD** ☒ Change ☒ Addition  
NAME **Grainder, John R.**  
STREET ADDRESS **55 Shuman Blvd., Suite 400**  
CITY-ST-ZIP **Naperville, Illinois 60563**

TITLE **V** ☐ Delete  
NAME **EDWARDS, BEVERLY**  
STREET ADDRESS **4780 LIBRARY ROAD**  
CITY-ST-ZIP **BETHEL PARK PA 15102**

TITLE ☐ Change ☐ Addition  
NAME **Please see attached additional**  
STREET ADDRESS **listing of officers**  
CITY-ST-ZIP

TITLE **AS** ☐ Delete  
NAME **EVANS, LORI ANN E**  
STREET ADDRESS **3221 N SERVICE RD**  
CITY-ST-ZIP **BURLINGTON ONTARIO L7R 3Y8**

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

TITLE **VP** ☐ Delete  
NAME **ROSENBERG, IRWIN**  
STREET ADDRESS **15260 VENTURA BLVD., STE. 1050**  
CITY-ST-ZIP **SHERMAN OAKS CA 91403**

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

TITLE **VPT** ☐ Delete  
NAME **ISEL, LARRY**  
STREET ADDRESS **5360 COLLEGE PARK, STE. 200**  
CITY-ST-ZIP **OVERLAND PARK KS 66211**

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

TITLE **S** ☒ Delete  
NAME **RIGGS, SUSANNAH H**  
STREET ADDRESS **3221 N SERVICE RD**  
CITY-ST-ZIP **BURLINGTON ONTARIO L7R 3Y8**

TITLE **S** ☐ Change ☒ Addition  
NAME **Cairns, Ivan R.**  
STREET ADDRESS **3221 N. Service Road**  
CITY-ST-ZIP **Burlington, Ontario L7R 3Y8**

12. 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 10 or Block 11 if changed, or on an attachment with an address, with an office like empowered.

SIGNATURE:

*Lori Ann E. Evans*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**L. E. Evans**

**January 27, 2003**

**(905) 336-1800**

Assistant Secretary

CR2E034 (10/02)

Attachment

90019152

# F97000004653

**Officers and Directors**

**Safe Ride Services, Inc.  
Listing of Additional Officers**

<u>Officer</u>	<u>Title</u>
Frank Ciccarella	Vice-President of Safety and Security
Susan Spry	Vice-President - Sales
Michael Wade	Vice-President - Information Technology
Mark Wells	Area Vice-President - West Area
Susan Arrott Whittaker	Assistant Secretary
William Hershel Yates	Senior Vice-President
Hayward M. Seymore	Vice-President, Fleet and Maintenance
Robert Antoine	Vice-President, Human Resources

Frank Ciccarella

Business: 5360 College Blvd., Suite 200  
Overland Park, KS 66211

Susan Spry

Business: Independence Plaza  
1050 17th Street, Suite 1750  
Denver, CO 80265-1050

Michael Wade

Business: 5360 College Blvd., Suite 200  
Overland Park, KS 66211

Mark Wells

Business: 15260 Ventura Boulevard  
Suite 1050  
Sherman Oaks, CA 91403

Susan Arrott Whittaker

Business: 600 Six Flags Dr., Suite 300  
Arlington, TX 76011-6329

William Hershel Yates

Business: 5360 College Blvd.  
Overland Park, KS 66211

Hayward M. Seymore

Business: 5360 College Blvd.  
Overland Park, KS 66211

Robert Antoine

Business: 5360 College Blvd.  
Overland Park, KS 66211