2000 UNIFORM BUSINESS REPORT (UBR)

FILED DOCUMENT # **F97000006455** Mar 07, 2000 8:00 am Secretary of State ARNOLD TRANSPORTATION SERVICES, INC. 03-07-2000 90094 026 ***150.00 Principal Place of Business Mailing Address 4410 INDUSTRIAL PARK ROAD 4410 INDUSTRIAL PARK ROAD CAMP HILL PA 17011 CAMP HILL PA 17011-5736 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 23-1582737 Not Applicable \$8.75 Additional Country Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 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. DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!!FEE IS \$150,00___. 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS CE₀ TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME WALTERS, MIKE STREET ADDRESS 9523 FLORIDA MINING BLVD E STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP JACKSONVILLE FL 17011 ☐ Change ☐ Addition ☐ Delete TITLE WALBORN, RONALD E NAME STREET ADDRESS STREET ADDRESS 1714 NORTH SECOND STREET CITY-ST-ZIP CITY-ST-ZIP HARRISBURG PA 17102 ☐ Change — ☐ Addition ☐ Delete JOHNSON DONALD G NAME STREET ADDRESS STREET ADDRESS 625 SOUTH FIFTH AVENUE CITY-ST-ZIP CITY-ST-ZIP **LEBANON PA 17042** PRESIDENT Addition TITLE Delete TITLE NAME **ENCK, DOUGLAS B** STREET ADDRESS 4410 INDUSTRIAL PARK ROAD STREET ADDRESS **451 FREIGHT STREET** CITY-ST-ZIP CITY-ST-ZIP CAMP HILL PA 17011 CAMP HILL PA 17011 ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Change ☐ Delete TITLE NAMÉ NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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.

DOUID A. SEMPELES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR