

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000002932

FILED  
Jan 07, 2008  
Secretary of State

Entity Name: THYSSENKRUPP LOGISTICS, INC.

## Current Principal Place of Business:

22355 WEST 11 MILE ROAD  
SOUTHFIELD, MI 48033

## New Principal Place of Business:

## Current Mailing Address:

3155 WEST BIG BEAVER ROAD  
SUITE 100  
TROY, MI 48084

## New Mailing Address:

FEI Number: 52-2107657      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 323012525 US

## Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete  
Name: GREAVES, RICHARD J  
Address: 22355 W 11 MILE RD.  
City-St-Zip: SOUTHFIELD, MI 48033

Title: VPD ( ) Delete  
Name: BABER, JAMES  
Address: 22355 W. 11 MILE ROAD  
City-St-Zip: SOUTHFIELD, MI 48033

Title: STD ( ) Delete  
Name: GILL, A. MALCOLM  
Address: 22355 W 11 MILE RD.  
City-St-Zip: SOUTHFIELD, MI 48033

Title: TREA ( ) Delete  
Name: JOHNSON, CHRISTOPHER  
Address: 22355 W 11 MILE RD.  
City-St-Zip: SOUTHFIELD, MI 48033

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: GILL, A. MALCOLM  
Address: 22355 W 11 MILE RD.  
City-St-Zip: SOUTHFIELD, MI 48033

Title: V (X) Change ( ) Addition  
Name: AGINIAN, ROBERT  
Address: 3155 WEST BIG BEAVER ROAD  
City-St-Zip: TROY, MI 48084

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ROBERT AGINIAN

V

01/07/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date