

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F99000005136

1. Entity Name

NATIONAL LOGISTICS CORPORATION

FILED

Apr 23, 2001 8:00 am  
Secretary of State

04-23-2001 90247 031 \*\*\*150.00

Principal Place of Business

Mailing Address

1701 QUINCY AVENUE, SUITE 5  
NAPERVILLE IL 60540

1701 QUINCY AVENUE, SUITE 5  
NAPERVILLE IL 60540

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 36-3366514

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STATON, DON  
2202 SW 6TH COURT  
BOCA RATON FL 33486

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.

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  
Tax filing requirement and elects to do so. ☐  
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

10. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PCS  
NAME STATON, JOHN D  
STREET ADDRESS 1101 BAUER ROAD  
CITY-ST-ZIP NAPERVILLE IL 60563 ☐ Delete

TITLE CONTROLLER  
NAME WANDA L. NELSON  
STREET ADDRESS 9 PEBBLEWOOD TRAIL  
CITY-ST-ZIP NAPERVILLE, IL 60563 ☐ Change ☒ Addition

TITLE D  
NAME STATON, NANCY  
STREET ADDRESS 1101 BAUER ROAD  
CITY-ST-ZIP NAPERVILLE IL 60563 ☐ Delete

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

TITLE DV  
NAME STATON, MARK  
STREET ADDRESS 1121 ANDRIA COURT  
CITY-ST-ZIP NAPERVILLE IL 60540 ☐ Delete

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

TITLE T  
NAME ~~TAGLE, SYLVIA~~  
STREET ADDRESS ~~2004 BODDINGTON LANE~~  
CITY-ST-ZIP ~~NAPERVILLE IL 60564~~ ☒ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

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

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)