

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000006131

FILED
Feb 06, 2009
Secretary of State

Entity Name: FEDEX SUPPLY CHAIN SERVICES, INC.

Current Principal Place of Business:

5455 DARROW ROAD
HUDSON, OH 44236

New Principal Place of Business:

Current Mailing Address:

5455 DARROW ROAD
HUDSON, OH 44236

New Mailing Address:

FEI Number: 34-1614601 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: P () Delete
Name: SIMON, CRAIG M
Address: 5025 TUGGLE RD
City-St-Zip: MEMPHIS, TN 38118

Title: AS () Delete
Name: DEPOY, SCOTT
Address: 1000 FEDEX DR
City-St-Zip: MOON TOWNSHIP, PA 15108

Title: V () Delete
Name: LUKACHINSKY, FRED
Address: 5455 DARROW RD.
City-St-Zip: HUDSON, OH 44236

Title: D () Delete
Name: GLENN, T. MICHAEL
Address: 942 SHADY GROVE RD
City-St-Zip: MEMPHIS, TN 38120

Title: AT () Delete
Name: FRYT, MICHAEL D
Address: 942 S SHADY GROVE RD
City-St-Zip: MEMPHIS, TN 38120

Title: D () Delete
Name: CARTER, ROBERT B
Address: 942 SHADY GROVE RD
City-St-Zip: MEMPHIS, TN 38120

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: AS (X) Change () Addition
Name: KLANK III, EDWARD C
Address: 942 SOUTH SHADY GROVE ROAD
City-St-Zip: MEMPHIS, TN 38120

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

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

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

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

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: FRED LUKACHINSKY

V

02/06/2009

Electronic Signature of Signing Officer or Director

_____ Date