2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# F99000006699

Entity Name: C.H. ROBINSON TRANSPORTATION COMPANY INC.

Current Principal Place of Business:

14701 CHARLSON RD
1400
EDEN PRAIRIE, MN 55347

New Principal Place of Business:

Current Mailing Address:

14701 CHARLSON RD
1400
EDEN PRAIRIE, MN 55347

New Mailing Address:

FEI Number: 41-1956721 **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: CD ( ) Delete
Name: WIEHOFF, JOHN P
Address: 14701 CHARLSON ROAD, SUITE 1400
City-St-Zip: EDEN PRAIRIE, MN 55347

Title: T ( ) Delete
Name: RENNER, TROY
Address: 14701 CHARLSON ROAD, SUITE 1400
City-St-Zip: EDEN PRAIRIE, MN 55347

Title: VSD ( ) Delete
Name: FEUSS, LINDA
Address: 14701 CHARLSON ROAD, SUITE 1400
City-St-Zip: EDEN PRAIRIE, MN 55347

Title: P ( ) Delete
Name: WIEHOFF, JOHN P
Address: 14701 CHARLSON ROAD, SUITE 1400
City-St-Zip: EDEN PRAIRIE, MN 55347

Title: CFO ( ) Delete
Name: LINDBLOOM, CHAD M
Address: 14701 CHARLSON ROAD, SUITE 1400
City-St-Zip: EDEN PRAIRIE, MN 55347

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VSD (X) Change ( ) Addition
Name: CAMPBELL, BEN
Address: 14701 CHARLSON ROAD, SUITE 1400
City-St-Zip: EDEN PRAIRIE, MN 55347

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: TROY RENNER T 04/13/2009

Electronic Signature of Signing Officer or Director — Date