FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **J75193** **(9)**

1. Corporation Name

CENTRAL COURIER SYSTEMS, INC.

Principal Place of Business

2109 EAST PALM AVENUE
TAMPA FL 33605

Mailing Address

C/O U.S. DELIVERY SYSTEMS
11 GREENWAY PLAZA, SUITE 250
HOUSTON TX 77046

3. Date Incorporated or Qualified: **05/27/1987**

3a. Date of Last Report: **04/25/1995**

2. Principal Place of Business
21:

Suite, Apt. #, etc.
22:

City & State
23:

Zip: 24: Country: 25:

2a. Mailing Address
26: c/o Legal Dept.

Suite, Apt. #, etc.
27: 11 Greenway Plaza, Ste. 250

City & State
28: Houston, Texas

Zip: 29: 77046 Country: 30: USA

4. FEI Number: **59-2807403** ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City: **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE (Signature of a director or officer of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; OR if changing Registered Agent, Signature of the new Registered Agent) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☐ DELETE	11 TITLE		☐ Change ☐ Addition
NAME	COFFEY, GERARD A		12 NAME		
STREET ADDRESS	2109 EAST PALM AVENUE		13 STREET ADDRESS		
CITY-ST-ZIP	TAMPA FL 33605		14 CITY-ST-ZIP		
TITLE	VTD	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	HADDOX, JAMES H		22 NAME		
STREET ADDRESS	11 GREENWAY PLAZA, SUITE 250		23 STREET ADDRESS		
CITY-ST-ZIP	HOUSTON TX 77046		24 CITY-ST-ZIP		
TITLE	VSD	☒ DELETE	31 TITLE	VSD	☐ Change ☒ Addition
NAME	HUMPHREYS, SAM W		32 NAME	Ramey, Shon C.	
STREET ADDRESS	11 GREENWAY PLAZA, SUITE 250		33 STREET ADDRESS	11 Greenway Plaza, Suite 250	
CITY-ST-ZIP	HOUSTON TX 77046		34 CITY-ST-ZIP	Houston, TX 77046	
TITLE	AS	☐ DELETE	41 TITLE		☐ Change ☐ Addition
NAME	BUCHANAN, REBECCA S		42 NAME		
STREET ADDRESS	11 GREENWAY PLAZA, SUITE 250		43 STREET ADDRESS		
CITY-ST-ZIP	HOUSTON TX 77046		44 CITY-ST-ZIP		
TITLE		☐ DELETE	51 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY-ST-ZIP		

CR2E034 (12/95)

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Shon C. Ramey **Shon C. Ramey, Secretary** 03/22/96 713-867-5070

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #