## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K53153

FILED Mar 24, 2009 Secretary of State

Entity Name: STAR INTERMODAL TRANSPORTATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

291 B BLANDING BLVD 967 MARTIN AVE

ORANGE PARK, FL 32073 US GREEN COVE SPRINGS, FL 32043 US

**Current Mailing Address: New Mailing Address:** 

291-B BLANDING BLVD PO BOX 248

ORANGE PARK, FL 32073 US GREEN COVE SPRINGS, FL 32043 US

FEI Number: 59-2921254 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

NEW, LAUREL A NEW, LAUREL A 291B BLANDING BLVD. 967 MARTIN AVE

ORANGE PARK, FL 32073 GREENCOVE SPRINGS, FL 32043 US US

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: LAUREL NEW 03/24/2009

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

Title:

Title: (X) Change ( ) Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete NEW, LAUREL A., NEW, LAUREL A., Name: Name: 2470 STOCKTON DRIVE PO BOX 248 Address: Address:

City-St-Zip: GREEN COVE SPRINGS, FL City-St-Zip: GREEN COVE SPRINGS, FL 32043 US

Title: DVS Title: DVS () Delete (X) Change ( ) Addition

NEW, KENNETH E., Name: NEW. KENNETH E.. Name: 2470 STOCKTON DR PO BOX 248 Address: Address:

GREEN COVE SPRINGS, FL GREEN COVE SPRINGS, FL 32043 City-St-Zip: 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.

Ρ SIGNATURE: LAUREL NEW 03/24/2009