

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 PM 6:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **L47714 (5)**
1. Corporation Name
INTERNATIONAL LOGISTICS RESEARCH INSTITUTE, INC.

Principal Place of Business

Mailing Address

C/O H. GREG LEE
2014 FOURTH STREET
SARASOTA FL 34237

172 LOUREL LANE
PONTE VEDRA BEACH FL 32082
US

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified	3a. Date of Last Report
02/06/1990	07/13/1994
4. FEI Number	Applied For
65-0174681	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21. 1214 Peppertree Lane	26. 1214 Peppertree Lane
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22. City & State	27. City & State
23. Sarasota, Florida	28. Sarasota, Florida
Zip	Zip
24. 34242	29. 34242
Country	Country
25. USA	30. USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEE, H. GREG
2014 FOURTH STREET
SARASOTA FL 34237

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 typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1. TITLE	☐ Change ☐ Addition
NAME	LAMBERT, DOUGLAS	12. NAME	
STREET ADDRESS	172 LAUREL LANE	13. STREET ADDRESS	
CITY ST ZIP	PONTE VEDRA BCH FL	14. CITY ST ZIP	
TITLE	D	21. TITLE	☐ Change ☐ Addition
NAME	CHRISTOPHER, MARTIN	22. NAME	
STREET ADDRESS	ROSE VILLA, BRIDGEND	23. STREET ADDRESS	
CITY ST ZIP	CARLTON, BEDFORD, U.K.	24. CITY ST ZIP	
TITLE		31. TITLE	☐ Change ☐ Addition
NAME		32. NAME	
STREET ADDRESS		33. STREET ADDRESS	
CITY ST ZIP		34. CITY ST ZIP	
TITLE		41. TITLE	☐ Change ☐ Addition
NAME		42. NAME	
STREET ADDRESS		43. STREET ADDRESS	
CITY ST ZIP		44. CITY ST ZIP	
TITLE		51. TITLE	☐ Change ☐ Addition
NAME		52. NAME	
STREET ADDRESS		53. STREET ADDRESS	
CITY ST ZIP		54. CITY ST ZIP	
TITLE		61. TITLE	☐ Change ☐ Addition
NAME		62. NAME	
STREET ADDRESS		63. STREET ADDRESS	
CITY ST ZIP		64. CITY ST ZIP	

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)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Douglas M. Lambert 4/24/95 904-646-2585
President