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Mar 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

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



Principal Place of Business

Mailing Address

**1214 PEPPERTREE LANE
8014 FOURTH STREET
SARASOTA FL 34242
US**

**P.O. BOX 2166
PONTE VEDRA BEACH FL 32004-2166
US**

2. Principal Place of Business

2a. Mailing Address

21 **1214 Peppertree Lane**

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 **Sarasota, Florida**

28 Zip

24 **34242** 25 **USA**

29 Country

30

9. Name and Address of Current Registered Agent

**LEE, H. GREG
2014 FOURTH STREET
SARASOTA FL 34237**

3. Date Incorporated or Qualified

02/06/1990

3a. Date of Last Report

06/05/1996

4. FEI Number

65-0174681

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

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 the person making changes on this report and not applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☐ DELETE
NAME	LAMBERT, DOUGLAS	
STREET ADDRESS	172 LAUREL LANE	
CITY-STATE	PONTE VEDRA BCH FL	
TITLE	D	☐ DELETE
NAME	CHRISTOPHER, MARTIN	
STREET ADDRESS	ROSE VILLA, BRIDGEND	
CITY-STATE	CARLTON, BEDFORD, U.K	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-STATE		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-STATE-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Telephone Number

Douglas M. Lambert 3/12/97 904-880-8653

CR2E034 (9/96)