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Mar 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **M72353** (9)

1. Corporation Name
GATX CONTRACT CARRIERS, INC.

Principal Place of Business

**1301 RIVERPLACE BLVD
1200
JACKSONVILLE FL 32207
US**

Mailing Address

**1301 RIVERPLACE BLVD
1200
JACKSONVILLE FL 32207-8023
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. 105
TALLAHASSEE FL 32301**

3. Date Incorporated or Qualified

03/17/1988

3a. Date of Last Report

05/01/1996

4. FEI Number

59-2885610

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, typed or printed name of registered agent and the applicable)

(NOTE: Registered Agent's signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
**KENNY, BRIAN
500 W MONROE
CHICAGO IL**

TITLE ☒ DELETE

NAME
**VSD
MOORE, DANIEL D
1301 RIVERPLACE BLVD SUITE 1200
JACKSONVILLE FL**

TITLE ☐ DELETE

NAME
**D
GARDNER, MICHAEL J
1301 RIVERPLACE BLVD SUITE 1200
JACKSONVILLE FL**

TITLE ☐ DELETE

NAME
**AS
LEVIN, JOHN D
500 W MONROE
CHICAGO IL**

TITLE ☐ DELETE

NAME
**AT
BRANDT, SANDRA K
500 W MONROE
CHICAGO IL**

TITLE ☐ DELETE

NAME
**AT
BRANDT, SANDRA K
500 W MONROE
CHICAGO IL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE **DV** ☒ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE ☐ Change ☒ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

**PD
Joseph A. Nicosia
1301 Riverplace Blvd. #1800
Jacksonville, FL 32207**

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

Daytime Phone #

Michael J. Gardner 2/20/97 (904) 396-2517

CR2E034 (9/96)