2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004179

TOWNE, DOUG

1640 PHOENIX BLVD. SUITE 200

COLLEGE PARK, GA 30349

Name:

Address:

City-St-Zip:

FILED Jan 04, 2008 Secretary of State

Entity Nan	ne: THE LO	OGISTICAF	RE FOUNDATION, I	NC.				
Current Principal Place of Business:					New Principal Place of Business:			
1640 PHOENIX BLVD STE 200 COLLEGE PARK, GA 30349					1800 PHOENIX BLVD STE 120 COLLEGE PARK, GA 30349			
Current Mailing Address:					New Mailing Address:			
1640 PHOENIX BLVD, STE 200 COLLEGE PARK, GA 30349					1800 PHOENIX BLVD, STE 120 COLLEGE PARK, GA 30349			
FEI Number:	57-1206005	FEI Nu	mber Applied For()	FEI Nun	nber Not Appl	icable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:					Name and Address of New Registered Agent:			
HANDY, JO 12000 BISO STE 405 N MIAMI, F	CAYNE BLV							
The above in the State		ty submits	this statement for the	e purpose o	f changing i	ts registere	d office or registered agent, or both,	
SIGNATUR	RE:							
	Electi	ronic Signa	ture of Registered A	gent			Date	
OFFICERS AND DIRECTORS:					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	S GASTON, M 400 E JEFF CHARLOTTE		22902		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	D SHERMYEN 11817 NW 1 ALACHUA, F	22ND TERRA	ACE		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:		() Delete SEPH P AYNE BLVD, 331812725			Title: Name: Address: City-St-Zip:		() Change () Addition	
Title:	Р	() Delete			Title:	Р	(X) Change () Addition	

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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

TOWNE, DOUG

1800 PHOENIX BLVD. SUITE 120

COLLEGE PARK, GA 30349

SIGNATURE: JOSEPH HANDY **TREA** 01/04/2008