

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000087426

FILED  
Feb 16, 2011  
Secretary of State

Entity Name: SUDDATH LOGISTICS GROUP, INC.

**Current Principal Place of Business:**

815 S MAIN ST  
ATTN: LORI EISCHEN  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 48088  
ATTN: LORI EISCHEN  
JACKSONVILLE, FL 32247

**New Mailing Address:**

FEI Number: 59-3745006      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

BARNETT, JAMES G  
815 S MAIN ST  
JACKSONVILLE, FL 32207      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: C  
Name: SUDDATH, STEPHEN M  
Address: 815 S MAIN ST  
City-St-Zip: JACKSONVILLE, FL 32207

Title: CEOD  
Name: VAUGHN, BARRY S  
Address: 815 S MAIN ST  
City-St-Zip: JACKSONVILLE, FL 32207

Title: VD  
Name: BARNETT, JAMES G  
Address: 815 S MAIN ST  
City-St-Zip: JACKSONVILLE, FL 32207

Title: SD  
Name: STRICKLAND, BARBARA S  
Address: 815 S MAIN ST  
City-St-Zip: JACKSONVILLE, FL 32207

Title: P  
Name: MACKER, BRETT  
Address: 815 S MAIN ST  
City-St-Zip: JACKSONVILLE, FL 32207

I hereby 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 all other like empowered.

SIGNATURE: JAMES G. BARNETT

VD

02/16/2011

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date