

FILE NQW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 12 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P02783** (9)

1. Corporation Name
LIDLAW TRANSIT, INC.

Principal Place of Business 450 17TH AVENUE S. NAPLES FL 33940	Mailing Address 3221 NORTH SERVICE RD., P.O. BOX 5028 BURLINGTON, ONTARIO CANADA L7R 3Y8
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/23/1984	3a. Date of Last Report 06/21/1996
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-2364035		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23 Zip	28 Country	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24 Zip	25 Country	29 Zip		30 Country	
24		25		29	
25		29		30	

9. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83		84 City	
		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 reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D ☐ DELETE	1.1 TITLE	P/D ☒ Change ☐ Addition
NAME	GRAINGER, JOHN	1.2 NAME	John R. Grainger
STREET ADDRESS	120 MAPLEWOOD RD.	1.3 STREET ADDRESS	3221 N. Service Road
CITY-ST-ZIP	MISSISSAUGA, ONTARIO CANADA L7R -3Y8	1.4 CITY-ST-ZIP	Burlington, ONT. CANADA L7R 3Y8
TITLE	S ☒ DELETE	2.1 TITLE	S ☐ Change ☒ Addition
NAME	BYRNE, ROBERT HN.	2.2 NAME	Dick van Wyck
STREET ADDRESS	2094 GORDIE TAPP CRESC.	2.3 STREET ADDRESS	3221 North Service Road
CITY-ST-ZIP	BURLINGTON ON	2.4 CITY-ST-ZIP	Burlington, ONT. CANADA L7R 3Y8
TITLE	SVP ☒ DELETE	3.1 TITLE	V ☐ Change ☒ Addition
NAME	WHITE, DAVID A.	3.2 NAME	Robert Hach
STREET ADDRESS	2111 KEITH CLOSE	3.3 STREET ADDRESS	1240 East Diehl Road, Suite 104
CITY-ST-ZIP	BURLINGTON, ONT. CAN	3.4 CITY-ST-ZIP	Naperville, IL 60563
TITLE	VT ☒ DELETE	4.1 TITLE	V/T ☐ Change ☒ Addition
NAME	JARRETT, ROBERT E. ,	4.2 NAME	Michael Forsayeth
STREET ADDRESS	RR #3	4.3 STREET ADDRESS	3221 N. Service Road
CITY-ST-ZIP	CAMBELLVILLE ONTARIO	4.4 CITY-ST-ZIP	Burlington, ONT. CANADA L7R 3Y8
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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: **DICK VAN WYCK, Secretary** 4/15/97 (905) 336-1800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)