2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000059632

Entity Name: FEDX DELIVERY SERVICES, INC.

FILED May 10, 2008 Secretary of State

2115 CONTINENTAL ST 2452 WINFIELD DRIVE ST CLOUD, FL 34769 KISSIMMEE, FL 34743

Current Mailing Address: New Mailing Address:

2115 CONTINENTAL ST 2452 WINFIELD DRIVE ST CLOUD, FL 34769 KISSIMMEE, FL 34743

FEI Number: 20-1184162 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MINAYA, SAMUEL D
2116 CONGRESS ST
2452 WINFIELD DRIVE
ST CLOUD, FL 34769 US
KISSIMMEE, FL 34743 US

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: INDIANA TAVAREZ 05/10/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: D (X) Change () Addition Name: MINAYA, HUASCAR Name: MINAYA, HUASCAR

Address: 2115 CONTINENTAL ST Address: 2452 WINFIELD DRIVE City-St-Zip: ST CLOUD, FL 34769 City-St-Zip: KISSIMMEE, FL 34743

Title: D () Delete Title: D (X) Change () Addition Name: TAVARES. WILLIAM M

Address: 1950 ANDREWS AVENUE APT.4B6 Address: 1950 ANDREWS AVENUE APT.4B6

City-St-Zip: BRONX, NY 10453 City-St-Zip: BRONX, NY 10453

Title: () Delete Title: D () Change (X) Addition

 Name:
 Name:
 INDIANA, TAVAREZ

 Address:
 Address:
 2452 WINFIELD DRIVE

 City-St-Zip:
 City-St-Zip:
 KISSIMMEE, FL 34743

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

SIGNATURE: INDIANA TAVAREZ D 05/10/2008