

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 09, 2008 8:00 am
Secretary of State

04-09-2008 90031 037 ***158.75

DOCUMENT # P07000082971

1. Entity Name
AIRPORT LOGISTICS CENTER, INC.



Principal Place of Business
**3306 BEACH BOULEVARD
JACKSONVILLE, FL 32207**

Mailing Address
**3306 BEACH BOULEVARD
JACKSONVILLE, FL 32207**

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

03302008 Chg-P CR2E034 (12/06)

4. FEI Number

26-0579555

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CURLEY, CHARLES R JR
1301 RIVERPLACE BOULEVARD, STE. 1500
JACKSONVILLE, FL 32207**

7. Name and Address of New Registered Agent

Name **JAMES F MORGAN**

Street Address (P.O. Box Number is Not Acceptable)

3306 BEACH BLVD

City

JACKSONVILLE

FL

Zip Code

32207

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/31/07

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME **D MORGAN, JAMES F** ☐ Delete
STREET ADDRESS **3306 BEACH BOULEVARD**
CITY-ST-ZIP **JACKSONVILLE, FL 32207**

TITLE
NAME **PRESIDENT J. RONALD RATLIFF** ☐ Delete
STREET ADDRESS **12186 WEST DIVIDING OAKS TRAIL**
CITY-ST-ZIP **JACKSONVILLE, FL 32223**

TITLE
NAME **VICE PRESIDENT D. DIRK NELSON** ☐ Delete
STREET ADDRESS **17 PARK AVENUE, SOUTH**
CITY-ST-ZIP **HINSDALE, ILL 60521**

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME **SEC-TREASURER** ☐ Change ☒ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME **PRESIDENT J. RONALD RATLIFF** ☐ Change ☒ Addition
STREET ADDRESS **12186 WEST DIVIDING OAKS TRAIL**
CITY-ST-ZIP **JACKSONVILLE, FL 32223**

TITLE
NAME **VICE PRESIDENT D. DIRK NELSON** ☐ Change ☒ Addition
STREET ADDRESS **17 SOUTH PARK AVENUE**
CITY-ST-ZIP **HINSDALE, ILL 60521**

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/31/08

Date

904-346-3668

Daytime Phone #