2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2001 8:00 am
Secretary of State

05-02-2001 90166 030 ***150.00

DOCUMENT # P14477

1. Entity Name
PENSKE LOGISTICS, INC.

Principal Place of Business	Mailing Address
RT. 10 GREEN HILLS READING PA 19607	RT. 10. GREEN HILLS P.O. BOX 1321 READING PA 19603-1321 US

00043513

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 95-3153638 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION FL 33324	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☒ (See criteria on back)

FILE NOW!!! FEE IS $150.00
After MAY 1, 2001 Fee will be $550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	CD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HARD, BRIAN	NAME	
STREET ADDRESS	RT. 10 GREEN HILLS	STREET ADDRESS	
CITY-ST-ZIP	READING PA	CITY-ST-ZIP	
TITLE	PD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	HARTNETT, VINCENT W	NAME	
STREET ADDRESS	RT 10 GREEN HILLS	STREET ADDRESS	
CITY-ST-ZIP	READING PA 19607	CITY-ST-ZIP	
TITLE	SVPD ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	CORUZZA, FRANK	NAME	
STREET ADDRESS	RT. 10 GREEN HILLS	STREET ADDRESS	
CITY-ST-ZIP	READING PA 19607	CITY-ST-ZIP	
TITLE	S ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	DUFF, MICHAEL A	NAME	
STREET ADDRESS	RT. 10 GREEN HILLS	STREET ADDRESS	
CITY-ST-ZIP	READING PA 19607	CITY-ST-ZIP	
TITLE	VT ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	ANGELBECK, WAYNE S	NAME	
STREET ADDRESS	RT. 10 GREEN HILLS	STREET ADDRESS	
CITY-ST-ZIP	READING PA 19607	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Wayne S Angelbeck — WAYNE ANGELBECK, VICE PRESIDENT AND TREASURER — 4/26/01 — 610-775-6006

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (10/00)