

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P14934

FILED  
Feb 08, 2009  
Secretary of State

Entity Name: OMNI FREIGHT BROKERS, INC.

## Current Principal Place of Business:

2212 SAWGRASS VILLAGE DRIVE  
PONTE VEDRA BEACH, FL 32082

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1674  
PONTE VEDRA BEACH, FL 320041674

## New Mailing Address:

FEI Number: 58-1529733

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCHMIDT, RONALD C.  
2212 SAWGRASS VILLAGE DRIVE  
PONTE VEDRA BEACH, FL 32082 US

## Name and Address of New Registered Agent:

SCHMIDT, RONALD C PTD  
2212 SAWGRASS VILLAGE DRIVE  
PONTE VEDRA BEACH, FL 32082 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: SCHMIDT, RONALD C.

02/08/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete  
Name: SCHMIDT, RONALD C.,  
Address: 2212 SAWGRASS VILLAGE DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VD ( ) Delete  
Name: JONES, BARBARA  
Address: 170 SOLANDO CAY CIRCLE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SD ( ) Delete  
Name: YOUNG, ANTHONY E.,  
Address: 100 E HURON ST., UNIT # 2204  
City-St-Zip: CHICAGO, IL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD (X) Change ( ) Addition  
Name: SCHMIDT, RONALD C PTD  
Address: 2212 SAWGRASS VILLAGE DRIVE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: VD (X) Change ( ) Addition  
Name: JONES, BARBARA VD  
Address: 170 SOLANDO CAY CIRCLE  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: SD (X) Change ( ) Addition  
Name: YOUNG, ANTONY E SD  
Address: 100 E HURON ST., UNIT # 2204  
City-St-Zip: CHICAGO, IL

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: RONALD C SCHMIDT

PTD

02/08/2009

Electronic Signature of Signing Officer or Director

Date