

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2003 8:00 am
Secretary of State

04-07-2003 90176 045 ***150.00

DOCUMENT # P25943

1. Entity Name
YELLOW TRANSPORTATION, INC.



Principal Place of Business
**10990 ROE AVE.
OVERLAND PARK KS 66211-1213**

Mailing Address
**10990 ROE AVE. MS A515
OVERLAND PARK KS 66211-1213
US**

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 **44-0594706**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CT CORPORATION SYSTEM
C/O CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND
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. 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

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete
NAME	WELCH, JAMES L	
STREET ADDRESS	8109 W 145TH STREET	
CITY-ST-ZIP	OVERLAND PARK KS 66223	
TITLE	S	<input type="checkbox"/> Delete
NAME	HORNBECK, D L	
STREET ADDRESS	5355 W 100TH ST	
CITY-ST-ZIP	OVERLAND PK KS	
TITLE	SRVP	<input type="checkbox"/> Delete
NAME	SCARBOROUGH, C: KERMIT	
STREET ADDRESS	12106 BLUEJACKET	
CITY-ST-ZIP	OVERLAND PARK KS 66213	
TITLE	D	<input type="checkbox"/> Delete
NAME	SMID, MICHAEL J	
STREET ADDRESS	8923 W 147TH ST	
CITY-ST-ZIP	OVERLAND PARK KS 66221	
TITLE	D	<input type="checkbox"/> Delete
NAME	DEFENBAUGH, STEVE E	
STREET ADDRESS	10132 SHADOW CIRCLE	
CITY-ST-ZIP	OLATHE KS 66061	
TITLE	D	<input type="checkbox"/> Delete
NAME	EMERY, DON	
STREET ADDRESS	4501 W 85TH	
CITY-ST-ZIP	PRAIRIE VILLAGE KS 66208	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	9154 Riggs	
CITY-ST-ZIP	Overland Park, KS 66212	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	6437 Norwood	
CITY-ST-ZIP	Shawnee-Mission, KS 66208	

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature] **Daniel L. Hornbeck** 3/31/03

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)