

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P28671** (6)
1. Corporation Name
PLM TRANSPORTATION EQUIPMENT CORPORATION



Principal Place of Business
**ONE MARKET
STUART STREET TOWER, SUITE 900
SAN FRANCISCO CA 94105
US**

Mailing Address
**ONE MARKET
STUART STREET TOWER, SUITE 900
SAN FRANCISCO CA 94105-1301
US**

3. Date Incorporated or Qualified
03/21/1990

3a. Date of Last Report
02/14/1995

4. FEI Number
94-2925084

Applied For
☐ Not Applicable

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

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
PD	TIDBALL, ROBERT N.	ONE MARKET, STEUART STREET TOWER, #900	SAN FRANCISCO CA	<input type="checkbox"/>
V	LANGEVELD, DIRK	ONE MARKET, STEUART TOWER, #900	SAN FRANCISCO CA	<input checked="" type="checkbox"/>
VSD	PEARY, STEPHEN	ONE MARKET, STEUART TOWER, #900	SAN FRANCISCO CA	<input type="checkbox"/>
TD	ALLGOOD, J. MICHAEL	ONE MARKET, STEUART TOWER, #900	SAN FRANCISCO CA	<input type="checkbox"/>
VD	GOODRICH, DOUGLAS P.	ONE MARKET, STEUART STREET TOWER, #900	SAN FRANCISCO CA	<input type="checkbox"/>
D	BESS, STEPHEN M.	ONE MARKET, STEUART TOWER, #900	SAN FRANCISCO CA	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	Change	Addition
1.1	2.1	2.2	2.3	2.4	<input checked="" type="checkbox"/>	<input type="checkbox"/>
3.1	3.2	3.3	3.4	4.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>
5.1	5.2	5.3	5.4	6.1	<input type="checkbox"/>	<input type="checkbox"/>
6.2	6.3	6.4			<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Lorraine Schwerin

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lorraine Schwerin, Assistant Secretary

5/7/96

Date

415/905-7360

Daytime Phone #

CR2E034 (12/95)