## 2000 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## FILED DOCUMENT # **P28671** May 01, 2000 8:00 am 1. Entity Name Secretary of State PLM TRANSPORTATION EQUIPMENT CORPORATION 05-01-2000 90410 041 \*\*\*150.00 Principal Place of Business Mailing Address ONE MARKET ONE MARKET STEUART STREET TOWER, SUITE 900 SAN FRANCISCO CA 94105 SAN FRANCISCO CA 94105-1420 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite City & State 4. FEI Number Applied For City & State 94-2925084 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be Tax filing requirement and elects to do so After MAY 1, 2000 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ₹ Change ☐ Addition PD TITLE TITLE Delete GOODRICH, DOUGLAS P NAME NAME 4800 STREET ADDRESS ONE MARKET STEUART STREET TOWER #900 STREET ADDRESS CITY-ST-7IP SAN FRANCISCO CA CITY-ST-ZIP Change ■ Addition ☐ Delete TITLE TITLE BROCK, RICHARD NAME ONE MARKET, STEUART TOWER, #900 STREET ADDRESS #800 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA **∑**Change Addition Delete TITLE SANTO, SUSAN NAME 4800 STREET ADDRESS ONE MARKET, STEUART TOWER, #900 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA ASST-SECRETARY Change Addition LORRAINE SCHWERIN-TOWER #800 Delete TITLE TITLE ALLGOOD, J. MICHAEL NAME NAME STREET ADDRESS ONE MARKET, STEUART TOWER, #900\_ STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA +Change ☐ Addition TITLE Delete TITLE TIDBALL, ROBERT N NAME NAME H 800 STREET ADDRESS ONE MARKET, STEUART STREET TOWER, #900-STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP SAN FRANCISCO CA ☐ Addition Change D ☐ Delete TITLE TITLE BESS, STEPHEN M. NAME NAME STREET ADDRESS STREET ADDRESS ONE MARKET, STEUART TOWER, #900-CITY-ST-ZIP CITY-ST-ZIP SAN FRANCISCO CA 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 expowered.