

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P34372**

1. Entity Name

TRAILER BRIDGE, INC.**FILED**
Apr 23, 2001 8:00 am
Secretary of State

04-23-2001 90223 025 ***150.00

Principal Place of Business

**10405 NEW BERLIN RD EAST
JACKSONVILLE FL 32226
US**

Mailing Address

**10405 NEW BERLIN RD EAST
JACKSONVILLE FL 32226
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 **13-3617986**

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

**THE PRENTICE-HALL CORPORATION SYSTEM INC.
1201 HAYS STREET
SUITE 105
TALLAHASSEE FL 32301**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above name submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Printed name of registered agent and use 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
NAME
STREET ADDRESS
CITY - ST - ZIP**P
HEIM, RALPH W
10405 NEW BERLIN RD E.
JACKSONVILLE FL 32226**☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**C
MCCOWN, JOHN D.
500 PARK AVE 5TH FLR
NEW YORK NY**☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**T
TANNER, MARK A.
10405 NEW BERLIN RD E.
JACKSONVILLE FL 32226**☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP**V
MORLEY, J. EDWARD
10405 NEW BERLIN RD E.
JACKSONVILLE FL 32226**☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ DeleteTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
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STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
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NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY - ST - ZIP☐ Change ☐ Addition

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: *Mark A. Tanner*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/22/2001

Date

904-751-7160

Daytime Phone #

CR2E034 (10/00)