FILE NOW: FILING FEE AFTER MAY 1ST IS $550.00

001307

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 23, 1999 8:00 am
Secretary of State
03-23-1999 90045 017 ***150.00

DOCUMENT # P36707

1. Corporation Name
AMERICOLD SERVICES CORPORATION

Principal Place of Business	Mailing Address
ONE CONCOURSE PARKWAY SUITE 450 ATLANTA GA 30328 US	ONE CONCOURSE PARKWAY SUITE 450 ATLANTA GA 30328 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed: 12/12/1991

2. Principal Place of Business	2a. Mailing Address
21 10 Glenlake Pkwy	26 10 Glenlake Pkwy
Suite, Apt. #, etc. 22 800	Suite, Apt. #, etc. 27 800
City & State 23 Atlanta Ga	City & State 28 Atlanta Ga
Zip / Country 24 30328 25 US	Zip / Country 29 30328 30 US

4. FEI Number: 93-0987431 ☐ Applied For ☐ Not Applicable

5. Certifcate 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 owes the current year Intangible Personal Property Tax. ☑ Yes ☐ No

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH 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 **FL** 85 Zip Code

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PCEO	☐ DELETE	1.1 TITLE		☑ Change ☑ Addition
NAME	MCNAMARA, DANIEL F.		1.2 NAME		
STREET ADDRESS	ONE CONCOURSE PARKWAY, SUITE 450		1.3 STREET ADDRESS		
CITY-ST-ZIP	ATLANTA GA 30328		1.4 CITY-ST-ZIP		
TITLE	VPC	☐ DELETE	2.1 TITLE		☑ Change ☐ Addition
NAME	SMITH, JOEL M.		2.2 NAME	SEE	
STREET ADDRESS	ONE CONCOURSE PARKWAY, SUITE 450		2.3 STREET ADDRESS		
CITY-ST-ZIP	ATLANTA GA 30328		2.4 CITY-ST-ZIP	ATTATCHED	
TITLE	T	☑ DELETE	3.1 TITLE		☑ Change ☑ Addition
NAME	FRIEDBERG, ROBERT		3.2 NAME		
STREET ADDRESS	PARK 80 WEST, PLAZA II		3.3 STREET ADDRESS	SCHEDULE	
CITY-ST-ZIP	SADDLE BROOK NJ 07663		3.4 CITY-ST-ZIP		
TITLE	S	☑ DELETE	4.1 TITLE	FOR	☑ Change ☑ Addition
NAME	BOOTH, BRIAN G.		4.2 NAME		
STREET ADDRESS	888 SW 5TH #1600		4.3 STREET ADDRESS	NEW ADDRESS	
CITY-ST-ZIP	PORTLAND OR		4.4 CITY-ST-ZIP		
TITLE	V	☑ DELETE	5.1 TITLE		☐ Change ☑ Addition
NAME	LENEVEU, JOHN P.		5.2 NAME	AND	
STREET ADDRESS	7007 SW CARDINAL LN #135		5.3 STREET ADDRESS		
CITY-ST-ZIP	PORTLAND OR		5.4 CITY-ST-ZIP	NEW OFFICERS	
TITLE	V	☑ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	SENA, F. STANLEY		6.2 NAME		
STREET ADDRESS	7007 SW CARDINAL LN #135		6.3 STREET ADDRESS		
CITY-ST-ZIP	PORTLAND OR		6.4 CITY-ST-ZIP		

14. 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 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 3/3/99.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (11/98)

Americold Corporation
OFFICERS

NAME	TITLE	ADRESS
DANIEL F. McNAMARA	President Chief Executive Officer	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
JOEL M. SMITH	Senior Vice President Chief Financial Officer	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
TONY WOODARD	Controller	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
FRED BEILSTEIN	Senior Vice President	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
HENRY J. JUSTICE	Senior Vice President	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
THOMAS W. RYAN	Senior Vice President	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
HECTOR RODRIGUEZ	Senior Vice President	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
DANE BEAR	Senior Vice President	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
JAMES BRIDGES	Vice President	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
SUSAN HALEY	Vice President	7007 S.W. Cardinal Lane, Suite 135 Portland, OR 97224
JOSEPH MacNow	Vice President	7007 S.W. Cardinal Lane, Suite 135 Portland, OR 97224
FRED WALKER	Vice President	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
TAMMY WORD	Secretary	10 Glenlake Parkway, Suite 800 Atlanta, GA 30328
MARY ANNE GILVIN	Assistant Secretary	Same as Above