

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Jan 29, 2001 8:00 am**
Secretary of State

01-29-2001 90115 049 ***150.00

DOCUMENT # P93000005665

1. Entity Name

TRANSPORTATION MANAGEMENT, INC.

Principal Place of Business

**1000 WEST LEONARD STREET
PENSACOLA FL 32501**

Mailing Address

**ONE RIVERWAY
SUITE 500
HOUSTON TX 77056-1921
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 **59-3156326**

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

**- CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title 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	<input type="checkbox"/> Delete	
	UPHAM, GREGORY	ONE RIVERWAY SUITE 500	HOUSTON TX 77056	<input checked="" type="checkbox"/>	
	DVPS	LONGO, ROBERT E	ONE RIVERWAY SUITE 500	HOUSTON TX 77056	<input type="checkbox"/>
	D	BURTWISTLE, LINDA	ONE RIVERWAY SUITE 500	HOUSTON TX 77056	<input checked="" type="checkbox"/>
	DCEO	GALLAGHER, FRANK P	ONE RIVERWAY SUITE 500	HOUSTON TX 77056-1921	<input type="checkbox"/>
	ACS	ROSECRANS, SHAYNE A	ONE RIVERWAY SUITE 500	HOUSTON TX 77056	<input type="checkbox"/>
	ACS	SANCHEZ, MICHAEL	ONE RIVERWAY SUITE 500	HOUSTON TX 77056	<input checked="" type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition	
	Stephanie Reyes	One Riverway, Suite 500	Houston, TX 77056	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	
	D	Linda Bell	One Riverway, Suite 500	Houston, TX 77056	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	
				<input type="checkbox"/>	<input type="checkbox"/>	

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: Shayne Rosecrans

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Shayne Rosecrans

Date

1-10-01 713-888-0104

Daytime Phone #

CR2E034 (10/00)