SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750.)

FILED
Sep 23 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1997

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

DOCUMENT # **P94000027323 (2)**

1. Corporation Name
MILLER FREEMAN TRANSPORT SERVICES, INC.

Principal Place of Business	Mailing Address
1133 LOUISIANA AVE. SUITE 210 WINTER PARK FL 32789	1133 LOUISIANA AVE. SUITE 210 WINTER PARK FL 32789

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/11/1994	3a. Date of Last Report: 04/26/1996
4. FEI Number: 59-3235969	☐ 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 owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

2. Principal Place of Business	2a. Mailing Address
21 Street: 600 Harrison Street	26 Street: 600 Harrison Street
22 Suite, Apt. #, etc.: 4th Floor	27 Suite, Apt. #, etc.: c/o Denise Brady
23 City & State: San Francisco, CA	28 City & State: San Francisco, CA
24 Zip: 94107 25 Country:	29 Zip: 94107 30 Country:

9. Name and Address of Current Registered Agent

HELYER, NICK
1133 LOUISIANA AVE.
SUITE 210
WINTER PARK FL 32789

10. Name and Address of New Registered Agent

81 Name: CT Corporation System
82 Street Address (P.O. Box Number is Not Acceptable): 1200 South Pine Island Road
83:
84 City: Plantation FL 85 Zip Code: 33324

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: Barbara A Burke — BARBARA A. BURKE SPECIAL ASSISTANT SECRETARY — DATE: 9-1097
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	PD	☑ DELETE	1.1 TITLE	CD	☑ Change ☑ Addition
NAME	HELYER, NICK		1.2 NAME	Marshall W. Freeman	
STREET ADDRESS	4111 CABRIELLA LANE		1.3 STREET ADDRESS	600 Harrison Street	
CITY-ST-ZIP	WINTER PARK FL		1.4 CITY-ST-ZIP	San Francisco, CA 94107	
TITLE	SV	☑ DELETE	2.1 TITLE	PD	☑ Change ☑ Addition
NAME	ROWLEY, IAN		2.2 NAME	Donald A. Pazour	
STREET ADDRESS	1525 GRANVILLE DR.		2.3 STREET ADDRESS	600 Harrison Street	
CITY-ST-ZIP	WINTER PARK FL		2.4 CITY-ST-ZIP	San Francisco CA 94107	
TITLE	TV	☑ DELETE	3.1 TITLE	VD	☑ Change ☑ Addition
NAME	HOWELL, BRIAN		3.2 NAME	Warren A. Ambrose	
STREET ADDRESS	3396 BURRAM PLACE		3.3 STREET ADDRESS	600 Harrison Street	
CITY-ST-ZIP	CASSELBERRY FL		3.4 CITY-ST-ZIP	San Francisco CA 94107	
TITLE	AT	☑ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SCHWANINGER, WILLIAM		4.2 NAME		
STREET ADDRESS	FT. LEE EXECUTIVE PARK		4.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LEE NJ		4.4 CITY-ST-ZIP		
TITLE	AS	☑ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	TERRANELLA, FRANK		5.2 NAME		
STREET ADDRESS	FT. LEE EXECUTIVE PARK		5.3 STREET ADDRESS		
CITY-ST-ZIP	FT LEE NJ		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (4/97)

14. I do 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.

SIGNATURE: [illegible] — Chairman — DATE: [illegible]