

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000049633 (8)

1. Corporation Name

PACER INTERNATIONAL, INC.



Principal Place of Business

551 S.E. 8TH STREET  
STE. 600  
DELRAY BEACH FL 33435  
US

Mailing Address

551 S.E. 8TH STREET  
STE. 600  
DELRAY BEACH FL 33435  
US

3. Date Incorporated or Qualified

06/29/1994

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

33483

Country

28

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DAWES, MICHAEL F  
50 N. LAURA ST., STE. 3550  
JACKSONVILLE FL 32202

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME AUSTIN, BEN T III  
STREET ADDRESS 551 SE 8TH STREET  
CITY-STATE-ZIP DELRAY BEACH FL  
☐ DELETE

1.1 TITLE EVP, Implementation  
1.2 NAME HAUGLAND, SCOTT D.  
1.3 STREET ADDRESS 551 SE 8TH STREET  
1.4 CITY-STATE-ZIP DELRAY BEACH, FL  
☐ Change ☒ Addition

TITLE EVP  
NAME DOERR, KARL W  
STREET ADDRESS 551 SE 8TH STREET  
CITY-STATE-ZIP DELRAY BEACH FL  
☐ DELETE

2.1 TITLE EVP, Corp. Dev.  
2.2 NAME O'DELL, RALPH M.  
2.3 STREET ADDRESS 551 S.E. 8TH STREET  
2.4 CITY-STATE-ZIP DELRAY BEACH, FL  
☐ Change ☐ Addition

TITLE EVP  
NAME BROWN, SCOTT  
STREET ADDRESS 551 SE 8TH STREET  
CITY-STATE-ZIP DELRAY BEACH FL  
☒ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-STATE-ZIP  
☐ Change ☐ Addition

TITLE VPGC  
NAME HANNAN, DAVID C  
STREET ADDRESS 551 SE 8TH STREET  
CITY-STATE-ZIP DELRAY BEACH FL  
☐ DELETE

4.1 TITLE  
4.2 NAME HANNAH, DAVID C.  
4.3 STREET ADDRESS  
4.4 CITY-STATE-ZIP  
☒ Change ☐ Addition

TITLE S  
NAME DILLON, GLENNA L  
STREET ADDRESS 551 SE 8TH STREET  
CITY-STATE-ZIP DELRAY BEACH FL  
☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-STATE-ZIP  
☐ Change ☐ Addition

TITLE ~~HAUGLAND, SCOTT~~  
NAME  
STREET ADDRESS  
CITY-STATE-ZIP  
☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-STATE-ZIP  
☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/23/96

Date

407-272-2702

Business Phone #

CR2E034 (12/95)