

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000049633

1. Entity Name

PACER INTERNATIONAL, INC.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
00 NOV 27 PM 2:18

Principal Place of Business

551 S.E. 8TH STREET  
STE. 600  
DELRAY BEACH FL 33483  
US

Mailing Address

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

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

REINSTATE FEE \$100.00

4. FEI Number 65-0517854

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name: LAWRENCE PLOUCHA, ATTY AT LAW  
Street Address (P.O. Box Number is Not Acceptable): ATKINSON, BINES, STONE, MANKUTA & PLOUCHA, PA  
City: 1946 Tyler Street  
City: Hollywood FL Zip Code: 33020

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 \$550.00  
After SEPTEMBER 13, 2000 Min. will be \$750.00  
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

TITLE	DVC	<input type="checkbox"/> Delete
NAME	AUSTIN, BEN III	
STREET ADDRESS	551 SE 8TH STREET	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	EVP	<input type="checkbox"/> Delete
NAME	DOERR, KARL W	
STREET ADDRESS	551 SE 8TH STREET	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	EVP	<input checked="" type="checkbox"/> Delete
NAME	HAUGLAND, SCOTT D.	
STREET ADDRESS	551 SE 8TH STREET	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	EVP	<input checked="" type="checkbox"/> Delete
NAME	HANNAH, DAVID C.	
STREET ADDRESS	551 SE 8TH STREET	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	AS	<input type="checkbox"/> Delete
NAME	DILLON, GLENNA L	
STREET ADDRESS	551 SE 8TH STREET	
CITY-ST-ZIP	DELRAY BEACH FL	
TITLE	EVP	<input checked="" type="checkbox"/> Delete
NAME	O'DELL, RALPH M	
STREET ADDRESS	551 SE 8TH STREET	
CITY-ST-ZIP	DELRAY BEACH FL	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	CEO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ORTH, WALTER, JR	
STREET ADDRESS	551 SE 8th Street	
CITY-ST-ZIP	DELRAY BEACH, FL 33483	
TITLE	COO	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SKINNER, JOHN	
STREET ADDRESS	551 SE 8th Street	
CITY-ST-ZIP	DELRAY BEACH, FL 33483	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/17/00

561-272-2702

CR2E034 (5/00)