FILED

2001 UNIFORM BUSINESS REPORT (UBR)

Jan 26, 2001 8:00 am DOCUMENT # P94000065326 **Secretary of State** TRANSPORTATION EQUIPMENT OF PENSACOLA, INC. 01-26-2001 90042 018 ***150.00 Principal Place of Business Mailing Address 1000 W LEONARD ST ONE RIVERWAY PENSACOLA FL SUITE 500 HOUSTON TX 77056 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3265494 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City 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) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550,00 Trust Fund Contribution. Added to Fees (See criteria on bàck) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS 12. **X** Addition TITLE ☐ Change Delete TITLE BURTWISTLE, LINDA Linda Bell NAME NAME STREET ADDRESS ONE RIVERWAY SUITE 500 STREET ADDRESS One Riverway, Suite 500 CITY-ST-ZIP **HOUSTON TX 77056** CITY-ST-ZIP Houston, TX 77056 DVPS ☐ Delete Change Addition TITI F TITLE LONGO, ROBERT E NAME NAME STREET ADDRESS ONE RIVERWAY SUITE 500 STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77056** CITY-ST-ZIP Addition TITLE □ Delete Change TITLE ROSECRANS, SHAYNE A NAME NAME STREET ADDRESS ONE RIVERWAY SUITE 500 STREET ADDRESS CITY-ST-ZIP **HOUSTON TX 77056** CITY-ST-ZIP X Delete TITLE ☐ Change Addition TITLE NAME SANCHEZ, MICHAEL NAME **ONE RIVERWAY SUITE 500** STREET ADDRESS STREET ADDRESS CITY-ST-ZIE **HOUSTON TX 77056** CITY-ST-ZIP [] Change X Addition TITLE Delete TITLE UPHAM, GREGORY Stephanie Reyes. NAME NAME ONE RIVERWAY SUITE 500 STREET ADDRESS STREET ADDRESS one Riverway, suite 500 CITY-ST-ZIP **HOUSTON TX 77056** CITY-ST-ZIP Houston DCEO ☐ Change TITLE ☐ Delete TITLE ☐ Addition GALLAGHER, FRANK P NAME NAME ONE RIVERWAY SUITE 500 STREET ADDRESS STREET ADDRESS **HOUSTON TX 77056** 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

Shaune Rollis

OFFICER OR DIRECTOR Shayne Rosecrans 1-10-01

713-888-0104

Daytime Phone #