

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000005564

FILED  
Apr 30, 2009  
Secretary of State

**Entity Name:** SOUTHERN ATLANTIC INTERMODAL & LOGISTICS, INC.

**Current Principal Place of Business:**

793 MAYPORT ROAD  
ATLANTIC BEACH, FL 32233 US

**New Principal Place of Business:**

2319 OCEANFOREST DR W  
ATLANTIC BEACH, FL 32233 US

**Current Mailing Address:**

793 MAYPORT ROAD  
ATLANTIC BEACH, FL 32233 US

**New Mailing Address:**

2319 OCEANFOREST DR W  
ATLANTIC BEACH, FL 32233 US

**FEI Number:** 59-3300076

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MEHLHOFF, CAROLE D  
2319 OCEANFOREST DRIVE  
ATLANTIC BEACH, FL 32233 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: MEHLHOFF, BRETT E  
Address: 2319 OCEANFOREST DR  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: TREA ( ) Delete  
Name: MEHLHOFF, CAROLE D  
Address: 2319 OCEANFOREST DRIVE  
City-St-Zip: ATLANTIC BEACH, FL 32233

Title: SEC ( ) Delete  
Name: MEHLHOFF, CAROLE D  
Address: 2319 OCEANFOREST DRIVE  
City-St-Zip: ATLANTIC BEACH, FL 32233

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** CAROLE MEHLHOFF

SEC

04/30/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date