

**2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 480433

**Entity Name:** APL LOGISTICS FREIGHT SYSTEMS, INC.

**FILED**  
**Apr 25, 2013**  
**Secretary of State**  
**CC1900003570**

**Current Principal Place of Business:**

34119 W. 12 MILE ROAD  
SUITE 300  
FARMINGTON HILLS, MI 48331

**Current Mailing Address:**

16220 N. SCOTTSDALE ROASD  
SUITE 300  
SCOTTSDALE, AZ 85254 US

**FEI Number: 59-1602627**

**Certificate of Status Desired: No**

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

THE PRENTICE-HALL CORPORATION SYSTEM, INC.  
1201 HAYES ST  
STE. 105  
TALLAHASSEE, FL 32301 US

*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

**Officer/Director Detail :**

Title REGIONAL FINANCE OFFICER  
Name TEE, TOMMY  
Address 16220 N. SCOTTSDALE ROAD, SUITE 300  
City-State-Zip: SCOTTSDALE AZ 85254

Title SECRETARY  
Name WINDLE, TIMOTHY J  
Address 16220 N. SCOTTSDALE ROAD, SUITE 300  
City-State-Zip: SCOTTSDALE AZ 85254

Title PRESIDENT, CEO, DIRECTOR  
Name HOWLAND, DAVID  
Address 16220 N. SCOTTSDALE ROAD, SUITE 300  
City-State-Zip: SCOTTSDALE AZ 85254

Title DIRECTOR  
Name ZASIMOVICH, ANTHONY M  
Address 16220 N. SCOTTSDALE ROAD, SUITE 300  
City-State-Zip: SCOTTSDALE AZ 85254

Title DIRECTOR  
Name MC ADAM III, JAMES H  
Address 456 ALEXANDRA ROAD #06-00, NOL BUILDING  
City-State-Zip: SINGAPORE 119962

*I hereby 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 all other like empowered.*

**SIGNATURE: TIMOTHY WINDLE**

**SECRETARY**

**04/25/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date