## 2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000029737

Entity Name: QUALITY DISTRIBUTION, INC.

**Current Principal Place of Business:** 

4041 PARK OAKS BOULEVARD SUITE 200

TAMPA, FL 33610

**Current Mailing Address:** 

4041 PARK OAKS BOULEVARD

SUITE 200

TAMPA, FL 33610 US

FEI Number: 59-3239073 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

FILED Apr 29, 2015

**Secretary of State** 

CC1371484839

Officer/Director Detail:

Title D/CEO Title SECRETARY, GC, SVP

Name ENZOR, GARY R. Name WILSON, JOHN

Address 4041 PARK OAKS BOULEVARD Address 4041 PARK OAKS BOULEVARD

SUITE 200

SUITE 200

TAMPA FL 33610 City-State-Zip: TAMPA FL 33610

Title CFO, EVP Title TREASURER, VP, CONTROLLER

Name TROY, JOSEPH J. Name COHAN, ROBIN

Address 4041 PARK OAKS BOULEVARD Address 4041 PARK OAKS BLVD.

SUITE 200

SUITE 200

City-State-Zip: TAMPA FL 33610 City-State-Zip: TAMPA FL 33610

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: JOHN WILSON SECRETARY 04/29/2015