

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000002557

**FILED**  
**Jan 07, 2014**  
**Secretary of State**  
**CC4551180201**

**Entity Name:** SALEM CARRIERS, INCORPORATED

**Current Principal Place of Business:**

175 CHARLOIS BLVD.  
WINSTON-SALEM, NC 27103

**Current Mailing Address:**

P.O. BOX 24788  
WINSTON-SALEM, NC 27114-4788

**FEI Number: 56-1332971**

**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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            C  
Name            LANGONE, KENNETH G  
Address        175 CHARLOIS BLVD.  
City-State-Zip: WINSTON-SALEM NC 27103

Title            DP  
Name            TEAGUE, THOMAS L  
Address        175 CHARLOIS BLVD.  
City-State-Zip: WINSTON-SALEM NC 27103

Title            ST  
Name            DULA, C. STEPHEN  
Address        175 CHARLOIS BLVD.  
City-State-Zip: WINSTON-SALEM NC 27103

*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: DULA , C. STEPHEN**

**SENIOR VP FINANCE**

**01/07/2014**

Electronic Signature of Signing Officer/Director Detail

Date