

**2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F03356

**FILED  
Apr 24, 2015  
Secretary of State  
CC9780087982**

**Entity Name:** APL LOGISTICS WAREHOUSE MANAGEMENT SERVICES, INC.

**Current Principal Place of Business:**

16220 N. SCOTTSDALE ROAD  
SUITE 300  
SCOTTSDALE, AZ 85254

**Current Mailing Address:**

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

**FEI Number:** 59-2042072

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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           TREASURER, DIRECTOR  
Name           SECK, EUGENE S Y  
Address        16220 N. SCOTTSDALE ROAD  
                  SUITE 300  
City-State-Zip: SCOTTSDALE AZ 85254

Title           SECRETARY, DIRECTOR  
Name           DEARTH, PHILLIP T  
Address        16220 N. SCOTTSDALE ROAD  
                  SUITE 300  
City-State-Zip: SCOTTSDALE AZ 85254

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

*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:** PHILLIP T. DEARTH

**SECRETARY**

**04/24/2015**

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

\_\_\_\_\_  
Date