

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000000752

FILED
Mar 17, 2011
Secretary of State

Entity Name: PACER STACKTRAIN INC.

Current Principal Place of Business:

2300 CLAYTON ROAD, SUITE 1200
CONCORD, CA 945202176

New Principal Place of Business:

6805 PERIMETER DR.
DUBLIN, OH 43016

Current Mailing Address:

2300 CLAYTON ROAD, SUITE 1200
CONCORD, CA 945202176

New Mailing Address:

6805 PERIMETER DR.
DUBLIN, OH 43016

FEI Number: 20-8510744

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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

OFFICERS AND DIRECTORS:

Title: CP
Name: AVRAMOVICH, DANIEL
Address: 6805 PERIMETER DR
City-St-Zip: DUBLIN, OH 43016

Title: CFO
Name: HAFFERY, JOHN J
Address: 6805 PERIMETER DR
City-St-Zip: DUBLIN, OH 43016

Title: V
Name: GORDON, MICHAEL D
Address: 6805 PERIMETER DR
City-St-Zip: DUBLIN, OH 43016

Title: S
Name: TAYLOR, LISA O
Address: 2300 CLAYTON ROAD, SUITE 1200
City-St-Zip: CONCORD, CA 945202176

Title: T
Name: BORELLI, SUSAN
Address: 6805 PERIMETER DR
City-St-Zip: DUBLIN, OH 43016

Title: AS
Name: MAGHES, CHARLES T JR
Address: 6805 PERIMETER DR
City-St-Zip: DUBLIN, OH 43016

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: CHARLES T. MAGHES JR.

AS

03/17/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date