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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 13, 1999 8:00 am **Secretary of State**

07-13-1999 90002 019 ***550.00

OCUMENT #

20865

Corporation Name SAIA MOTOR FREIGHT LINE, INC. 5 586791⁶ - 90002 - 19 incipal Place of Business Mailing Address P.O. BOX A STATION 1 104 WOODLAWN RANCH RD. Haima, LA. 70363 Hama, LA. 75363 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 9/13/1998 4. FEI Number Principal Place of Business 2a. Mailing Address Applied For 72-0524060 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certifcate of Status Desired \Box Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees -Country Zip Country 8. This corporation owes the current year Intangible X Yes □No 30 Personal Property Tax. 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 THE PRENTICE-HALL CORP Street Address (P.O. Box Number is Not Acceptable) 1201 HAYES ST. 82 Suite 105 83 TALLAHASSEE, FL 32301 Zip Code 84 City 85 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **IGNATURE** Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) R2E034 (11/98) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 2. OFFICERS AND DIRECTORS 13. Addition Change [] DELFTE TLE 1.1 TITLE PRESIDENT CRISP, JIMMY D. 104 LESOLAWN RANCH RD. 1.2 NAME AME 1.3 STREET ADDRESS TREET ADDRESS Hours, LA. 75363 1.4 CITY-ST-ZIP ITY-ST-ZIP ☐ Addition 2.1 TITLE πE VICE PRÉSIDENT GEGENHEMER, REUBEN J. 2.2 NAME AME 2.3 STREET ADDRESS TREET ADDRESS Houns, LA. 75363 2. 4 CITY-ST-ZIP ITY-ST-ZIP Addition □ DELETE ☐ Change 3.1 TITLE - FINANCE + ADMIN ЛF RICHARD D. O'DELL 3 2 NAME loy woo LAW RAPEH RD. 3.3 STREET ADDRESS TREET ADDRESS 3.4. CITY-ST-ZIP ITY-ST-ZIP Addition ☐ DELETE 4.1 TITLE ITLE 4.2 NAME AME 4,3 STREET ADDRESS TREET ADDRESS ITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE ☐ Change ☐ Addition 5.1 TITLE ME 5.2 NAME 5.3 STREET ADDRESS TREET ADDRESS 5.4 CITY-ST-ZIP :ITY-ST-ZIF ☐ Change ☐ Addition DELETE 6.1 TITLE TILE 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

JITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all pther like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

OF SIGNING OFFICER OR DIRECTOR

770 232 4072