

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
95 FEB 16 PM 2:55

DOCUMENT # **P34258** (4)

1. Corporation Name  
**C. H. ROBINSON INTERNATIONAL, INC.**

Principal Place of Business: **8100 MITCHELL RD. SUITE 200 EDEN PRAIRIE MN 55344**  
Mailing Address: **ATTENTION HEIDI HOSMER/LEGAL 8100 MITCHELL RD STE 200 EDEN PRAIRIE MN 55344 US**

DO NOT WRITE IN THIS SPACE.

2. Principal Place of Business:		2a. Mailing Address:		3. Date Incorporated or Qualified:	3a. Date of Last Report:
21. State, Apt. #, etc.	22. City & State	26. ATTN: LEGAL DEPT.	27. 8100 MITCHELL RD. 200	06/11/1991	05/23/1994
23. Zip	24. Country	28. EDEN PRAIRIE, MN	29. 55344	4. FEI Number:	Applied For / Not Applicable
25. Country	29. 55344	30. U.S.A.	31. City & State	41-1645783	
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
MULVEHILL, JOE 10100 NW 116 WAY SUITE 18 MEDLEY FL 33178			81. Name: MULVEHILL, JOE 82. Street Address (P.O. Box Number is Not Acceptable): 9960 N.W. 116TH WAY 83. SUITE 9 84. City: MEDLEY FL 85. Zip Code: 33178		

11. Pursuant to the provisions of Sections 607.0507 and 607.1505, 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.

SIGNATURE: **N/A - "AGENT" has not changed - only address.**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: DV	NAME: BUTZOW, BARRY	11 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 8100 MITCHELL RD.	CITY-ST-ZIP: EDEN PRAIRIE MN	12 NAME:	
		13 STREET ADDRESS:	
		14 CITY-ST-ZIP:	
TITLE: D	NAME: MADEJ, BERNARD	21 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 8100 MITCHELL RD.	CITY-ST-ZIP: EDEN PRAIRIE MN	22 NAME:	DV MADEJ, BERNARD
		23 STREET ADDRESS:	8100 MITCHELL ROAD
		24 CITY-ST-ZIP:	EDEN PRAIRIE, MN
		25 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: DST	NAME: MCCONKEY, DUANE	32 NAME:	
STREET ADDRESS: 8100 MITCHELL RD.	CITY-ST-ZIP: EDEN PRAIRIE MN	33 STREET ADDRESS:	
		34 CITY-ST-ZIP:	
		35 TITLE:	
TITLE: P	NAME: FLORA, SCOTT	41 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS: 8100 MITCHELL RD.	CITY-ST-ZIP: EDEN PRAIRIE MN	42 NAME:	(P) Robert Ingram
		43 STREET ADDRESS:	8100 Mitchell Road
		44 CITY-ST-ZIP:	Eden Prairie, MN
		45 TITLE:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE: VD	NAME: BUTZOW, BARRY	51 TITLE:	
STREET ADDRESS: 8100 MITCHELL RD.	CITY-ST-ZIP: EDEN PRAIRIE MN	52 NAME:	Joe Mulvehill
		53 STREET ADDRESS:	8100 Mitchell Road
		54 CITY-ST-ZIP:	Eden Prairie, MN (V)
		55 TITLE:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		56 NAME:	
		57 STREET ADDRESS:	
		58 CITY-ST-ZIP:	

14. I hereby certify that the information presented with this filing is voluntarily furnished and does not qualify for the exemption stated in Sections 119.07(3)(b), Florida Statutes. I further certify that the information included 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. I am an officer or director of the corporation or the owner or in charge of the corporation empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report, or on an attachment with an address.

SIGNATURE: *Duane McConkey*  
SIGNATURE AND TITLE OF OFFICER OR DIRECTOR OF CORPORATION:  
**Duane McConkey, Secretary/Treasurer**

2/02/95 (612) 937-8500  
Date Expired