2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2020
Secretary of State
8878914544CC

DOCUMENT# 162572

Entity Name: ARMELLINI EXPRESS LINES, INC.

Current Principal Place of Business:

3446 SW ARMELLINI AVE.
PALM CITY, FL 34990

Current Mailing Address:

P.O. BOX 678
PALM CITY, FL 34991

FEI Number: 23-1615254

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

POLYAK, JOHN G
3446 SW ARMELLINI AVE.
PALM CITY, FL 34990 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: JOHN G. POLYAK 01/30/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	CHAIRMAN, PRESIDENT, DIRECTOR
Name	ARMELLINI, DAVID
Address	3446 SW ARMELLINI AVENUE
City-State-Zip:	PALM CITY FL 34990

Title	VP, DIRECTOR
Name	ARMELLINI, RICHARD
Address	3446 SW ARMELLINI AVENUE
City-State-Zip:	PALM CITY FL 34990

Title	SECRETARY
Name	DUSHARM, JUDITH R
Address	3446 SW ARMELLINI AVENUE
City-State-Zip:	PALM CITY FL 34990

Title	VP
Name	JACKSON, JEFFREY
Address	3446 SW ARMELLINI AVENUE
City-State-Zip:	PALM CITY FL 34990

Title	D
Name	CORCIA, JOHN T
Address	3446 SW ARMELLINI AVENUE
City-State-Zip:	PALM CITY FL 34990

Title	VP
Name	ARMELLINI, STEPHEN
Address	3446 SW ARMELLINI AVENUE
City-State-Zip:	PALM CITY FL 34990

Title	VP
Name	BAUER, CARL
Address	3446 SW ARMELLINI AVENUE
City-State-Zip:	PALM CITY FL 34990

Title	DIRECTOR
Name	WELBORN, W. MILLER
Address	3446 SW ARMELLINI AVENUE
City-State-Zip:	PALM CITY FL 34990

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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: JUDITH DUSHARM SECRETARY 01/30/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SHAFFER, CHARLES M
Address	3446 SW ARMELLINI AVE.
City-State-Zip:	PALM CITY FL 34990

Title	CFO
Name	POLYAK, JOHN
Address	3446 SW ARMELLINI AVE.
City-State-Zip:	PALM CITY FL 34990

Title	EXECUTIVE SECRETARY
Name	SCHULZ, LINDA
Address	3446 SW ARMELLINI AVE.
City-State-Zip:	PALM CITY FL 34990

Title	VP
Name	STERLING, MARK
Address	3446 SW ARMELLINI AVE.
City-State-Zip:	PALM CITY FL 34990

Title	VP
Name	DUSHARM, JARED
Address	3446 SW ARMELLINI AVE.
City-State-Zip:	PALM CITY FL 34990

Title	VP
Name	ANDERSON, MARGARET
Address	3446 SW ARMELLINI AVE.
City-State-Zip:	PALM CITY FL 34990