## **2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000003162

Entity Name: GLOBAL VAN LINES, LLC

Jun 11, 2020 Secretary of State 0989659115CC

**FILED** 

## **Current Principal Place of Business:**

101 E. WASHINGTON BLVD., SUITE 1100

FORT WAYNE, IN 46802

**Current Mailing Address:** 

P.O. BOX 988

FORT WAYNE. IN 46801 US

FEI Number: 52-2150248 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title ASST. SECRETARY Title PRESIDENT

Name LEA, KATRINA L Name COOLIDGE, ANDREW P.

Address 101 E. WASHINGTON BLVD., SUITE Address 17 W 110 22ND STREET, SUITE 400

City-State-Zip:

OAKBROOK TERRACE IL 60181

1100

City-State-Zip: FORT WAYNE IN 46802

Title TREASURER Title SECRETARY

Name GAGLIANO, RYAN Name MARGOLIS, JEFFREY H

Address Address 6200 OAK TREE BLVD., SUITE 300 Address 17 W 110 22ND STREET, SUITE 400

City-State-Zip: INDEPENDENCE OH 44131

Title CFO

Title ASST. TREASURER Name CASSELL, STEPHEN M.

Name LAMB, JAMES R Address 211 N. BROADWAY, SUITE 2130

Address 17 W 110 22ND STREET, SUITE 400 City-State-Zip: ST. LOUIS MO 63102

OAKBROOK TERRACE IL 60181

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KATRINA L LEA ASSISTANT SECRETARY 06/11/2020