#### 2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F05000002230

**Entity Name: DAIMLER TRUCKS REMARKETING CORPORATION** 

**FILED** Jan 03, 2022 Secretary of State 4933785456CC

Date

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

4555 N. CHANNEL AVENUE

ATTENTION: CYNTHIA SCOTT HQ637B-LGL

PORTLAND, OR 97217

### **Current Mailing Address:**

4555 N. CHANNEL AVENUE

ATTENTION: CYNTHIA SCOTT HQ637B-LGL

PORTLAND, OR 97217 US

FEI Number: 94-2408781 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

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

Name

City-State-Zip:

City-State-Zip:

Officer/Director Detail:

Title DIRECTOR, CHAIRMAN Title DIRECTOR, PRESIDENT

Name O'LEARY, JOHN Name REED, THADDAUS

Address 4555 NORTH CHANNEL AVENUE Address 4555 NORTH CHANNEL AVENUE

ATTENTION: CYNTHIA SCOTT ATTENTION: CYNTHIA SCOTT

HQ637B-LGL HQ637B-LGL

PORTLAND OR 97217 City-State-Zip: PORTLAND OR 97217 City-State-Zip:

Title DIRECTOR DIRECTOR, VICE PRESIDENT Title **FINANCE** 

CARSON, DAVID Name

KURSCHNER, STEFAN Address 4555 NORTH CHANNEL AVENUE

Address 4555 NORTH CHANNEL AVENUE ATTENTION: CYNTHIA SCOTT

ATTENTION: CYNTHIA SCOTT HQ637B-LGL HQ637B-I GI

PORTLAND OR 97217 City-State-Zip: PORTLAND OR 97217 City-State-Zip:

Title SECRETARY

Title ASST. SECRETARY BURTON, BRIAN Name

CENTYBEAR, ANDREW Name Address 4555 NORTH CHANNEL AVENUE

4555 N. CHANNEL AVENUE Address ATTENTION: CYNTHIA SCOTT

ATTENTION: CYNTHIA SCOTT HQ637B-LGL

HQ637B-LGL PORTLAND OR 97217

City-State-Zip: PORTLAND OR 97217

Title TREASURER Title ASST. TREASURER Name MARQUEZ, ELOISA

KURUC, MICHAEL Name Address 4555 N. CHANNEL AVENUE

4555 N. CHANNEL AVENUE ATTENTION: CYNTHIA SCOTT Address

ATTENTION: CYNTHIA SCOTT HQ637B-I GI

HQ637B-LGL PORTLAND OR 97217

PORTLAND OR 97217 City-State-Zip:

# Continues on page 2

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.

01/03/2022 SIGNATURE: BRIAN BURTON SECRETARY

# Officer/Director Detail Continued:

Title ASST. TREASURER

ARAIZA, LUIS Name

Address

4555 N. CHANNEL AVENUE ATTENTION: CYNTHIA SCOTT HQ637B-LGL

City-State-Zip: PORTLAND OR 97217