

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000000564

**FILED**  
**Mar 24, 2023**  
**Secretary of State**  
**5003678296CC**

**Entity Name:** H&E EQUIPMENT SERVICES, INC.

**Current Principal Place of Business:**

7500 PECUE LANE  
BATON ROUGE, LA 70809

**Current Mailing Address:**

7500 PECUE LANE  
BATON ROUGE, LA 70809 US

**FEI Number:** 81-0553291

**Certificate of Status Desired:** No

**Name and Address of Current 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name BAGLEY, GARY W  
Address P O BOX 750207  
City-State-Zip: TORREY UT 84775

Title CEO  
Name BARBER, BRADLEY W  
Address 7500 PECUE LANE  
City-State-Zip: BATON ROUGE LA 70809

Title EXECUTIVE CHAIRMAN OF BOARD OF DIRECTORS  
Name ENGQUIST, JOHN M  
Address 7500 PECUE LANE  
City-State-Zip: BATON ROUGE LA 70809

Title SECRETARY, CFO  
Name MAGEE, LESLIE S  
Address 7500 PECUE LANE  
City-State-Zip: BATON ROUGE LA 70809

Title DIRECTOR  
Name ARNOLD, PAUL N  
Address 510 W 19TH AVE  
City-State-Zip: COVINGTON LA 70433

Title DIRECTOR  
Name BRUCKMANN, BRUCE C  
Address 804 TALLOW TREE COURT  
City-State-Zip: NAPLES FL 34108

Title DIRECTOR  
Name EDELL, PATRICK L  
Address 33781 GLOCAMORA LN  
City-State-Zip: SAN JUAN CAPISTRANO CA 92675

Title DIRECTOR  
Name GALLIGAN, THOMAS J III  
Address 12 ROUND HILL ROAD  
City-State-Zip: WESTON MA 02493

**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.*

**SIGNATURE:** LESLIE MAGEE

**CFO & SECRETARY**

**03/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name KARLSON, LAWRENCE C  
Address 2401 CASAS DE MARBELLA DR  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR  
Name THOMPSON, MARY PAT  
Address 3790 S SUNTREE PLACE  
City-State-Zip: BOISE ID 83706

Title DIRECTOR  
Name WOOD, SUZANNE H  
Address 105 STANDISH LANE  
City-State-Zip: MOORESVILLE NC 28117

Title PRESIDENT  
Name ENGQUIST, JOHN MCDOWELL  
Address 7500 PECUE LANE  
City-State-Zip: BATON ROUGE LA 70809

Title DIRECTOR  
Name THOMAS, JACOB  
Address 2302 CLARE PARK DRIVE  
City-State-Zip: FRANKLIN TN 37069