

2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001625

Entity Name: ENTERPRISE FLEET MANAGEMENT, INC.**Current Principal Place of Business:**9315 OLIVE BLVD
SAINT LOUIS, MO 63132**Current Mailing Address:**9315 OLIVE BLVD
SAINT LOUIS, MO 63132 US**FEI Number: NOT APPLICABLE****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 SENIOR VICE PRESIDENT
Name USSELMANN, STEVEN F.
Address 9315 OLIVE BLVD
City-State-Zip: SAINT LOUIS MO 63132

Title DIRECTOR
Name NICHOLSON, PAMELA M.
Address 9315 OLIVE BLVD
City-State-Zip: SAINT LOUIS MO 63132

Title DIRECTOR
Name TAYLOR, ANDREW C.
Address 9315 OLIVE BLVD
City-State-Zip: SAINT LOUIS MO 63132

Title SECRETARY
Name PERKINS, MEREDITH
Address 9315 OLIVE BLVD
City-State-Zip: SAINT LOUIS MO 63132

Title PRESIDENT
Name TAYLOR, CHRISTINE B
Address 9315 OLIVE BLVD
City-State-Zip: SAINT LOUIS MO 63132

Title DIRECTOR
Name SHORT, RICK A.
Address 9315 OLIVE BLVD
City-State-Zip: SAINT LOUIS MO 63132

Title TREASURER, VP, ASST. SECRETARY
Name SHORT, RICK A.
Address 9315 OLIVE BLVD
City-State-Zip: SAINT LOUIS MO 63132

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: STEVEN F. USSELMANN**SENIOR VICE PRESIDENT 03/31/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date