

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12880

FILED  
Jun 26, 2009  
Secretary of State

**Entity Name:** COMMERCIAL VEHICLE SOLUTIONS NETWORK, INC.

**Current Principal Place of Business:**

3943 BAYMEADOWS RD #2  
JACKSONVILLE, FL 322174636

**New Principal Place of Business:**

**Current Mailing Address:**

3943 BAYMEADOWS RD #2  
JACKSONVILLE, FL 322174636

**New Mailing Address:**

**FEI Number:** 42-0761277      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

VOLPE, ANGELO  
3943 BAYMEADOWS RD #2  
JACKSONVILLE, FL 322174636 US

**Name and Address of New Registered Agent:**

VOLPE, ANGELO S  
3943 BAYMEADOWS RD #2  
JACKSONVILLE, FL 322174636 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: ANGELO VOLPE

06/26/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: STEWART, TOM  
Address: 1308 UPPER ASBURY AVE  
City-St-Zip: CHARLOTTE, NC 28206 XX

Title: P ( ) Delete  
Name: KEN, DUVAL  
Address: 15030 - 118 AVE. E.  
City-St-Zip: EDMONTON, AB T2C 1X8 CA

Title: T ( ) Delete  
Name: KARON, MARC  
Address: 6545 WALLIS RD  
City-St-Zip: WEST PALM BEACH, FL 33413

Title: D ( ) Delete  
Name: COUSINS, WILLIAM  
Address: 2500 KENNEDY ST. NE  
City-St-Zip: MINNEAPOLIS, MN 55413

Title: D ( ) Delete  
Name: AMOROSA, HARRY  
Address: 1164 OLD BAYSHORE HWY  
City-St-Zip: SAN JOSE, CA 95112

Title: D ( ) Delete  
Name: POWERS, JOHN  
Address: 2265 W BEAVER ST.  
City-St-Zip: JACKSONVILLE, FL 32209

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: PASCALE, JIM  
Address: 51 DELTA DR.  
City-St-Zip: PAWTUCKET, RI 02861

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANGELO VOLPE

S

06/26/2009

Electronic Signature of Signing Officer or Director

Date