

2018 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000100030

Entity Name: KEXEL EXPRESS, INC.**Current Principal Place of Business:**194 FAIRWAY CIRCLE
WINTER HAVEN, FL 33881**Current Mailing Address:**194 FAIRWAY CIRCLE
WINTER HAVEN, FL 33881**FEI Number:** 83-0461797**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**KEXEL, MYRON J
194 FAIRWAY CIRCLE
WINTER HAVEN, FL 33881 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	DPS
Name	KEXEL, MYRON J
Address	194 FAIRWAY CIRCLE
City-State-Zip:	WINTER HAVEN FL 33881

Title	MRS
Name	ROTH, KIVA M
Address	1225 ORCHARD LANE.
City-State-Zip:	FORT ATKINSON WI 53538

Title	MR
Name	ROTH, KADE J
Address	1225 ORCHARD LANE
City-State-Zip:	FORT ATKINSON WI 53538

Title	VPT
Name	KEXEL, CHRISTINE A
Address	194 FAIRWAY CIRCLE
City-State-Zip:	WINTER HAVEN FL 33881

Title	MISS
Name	SCHUMACHER, JADA A
Address	1225 ORCHARD LANE.
City-State-Zip:	FORT ATKINSON WI 53538

Title	MISS
Name	ROTH, KIELE G
Address	1225 ORCHARD LANE
City-State-Zip:	FORT ATKINSON WI 53538

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: CHRISTINE A KEXEL

VPT

03/25/2018

Electronic Signature of Signing Officer/Director Detail_____
Date