

2018 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P12880

Entity Name: COMMERCIAL VEHICLE SOLUTIONS NETWORK, INC.**Current Principal Place of Business:**3943 BAYMEADOWS RD #2
JACKSONVILLE, FL 32217-4636**Current Mailing Address:**3943 BAYMEADOWS RD #2
JACKSONVILLE, FL 32217-4636**FEI Number:** 42-0761277**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VOLPE, ANGELO S
3943 BAYMEADOWS RD #2
JACKSONVILLE, FL 32217-4636 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	S
Name	VOLPE, ANGELO
Address	3943-2 BAYMEADOWS RD
City-State-Zip:	JACKSONVILLE FL 32217

Title	PRESIDENT
Name	ROBBLEE, ANDREW
Address	11010 TULWILA INTERNAT'L HWY
City-State-Zip:	TULWILA WA 98168

Title	OTHER
Name	NEELEY, EDWARD
Address	1270 BUCKNER ROAD
City-State-Zip:	COLUMBIA SC 29203

Title	DIRECTOR
Name	MCCORMICK, JAMES
Address	218 N WW WHITE RD
City-State-Zip:	SAN ANTONIO TX 78219

Title	DIRECTOR
Name	DUVAL, KEN
Address	15030 - 118 AVE. E.
City-State-Zip:	EDMONTON T5V 1B8

Title	VP
Name	ZURBUCHEN, TROY
Address	4107 TERMINAL RD
City-State-Zip:	MCFARLAND TX 53558

Title	DIRECTOR
Name	BELL, DAVE
Address	3017 W 12TH ST
City-State-Zip:	ERIE PA 16505

Title	DIRECTOR
Name	SHERBOURNE, WALT
Address	907 MEADOWOOD CIR
City-State-Zip:	HARRISBURG PA 17110-0795

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANGELO VOLPE**SECRETARY****04/24/2018**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title TREASURER
Name RYAN, SEAN
Address 7307 GRAND AVE
City-State-Zip: PITTSBURGH PA 15225

Title DIRECTOR
Name SEIDEL, NICK
Address 1 SEIDEL CT
City-State-Zip: BOLINGBROOK IL 60490

Title DIRECTOR
Name MIRTH, WILLIAM
Address 26555 NORTHWESTERN HWY
City-State-Zip: SOUTHFIELD MI 48033-2146