

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 855148

Entity Name: OLD DOMINION FREIGHT LINE, INC.**Current Principal Place of Business:**500 OLD DOMINION WAY
THOMASVILLE, NC 27360**Current Mailing Address:**500 OLD DOMINION WAY
THOMASVILLE, NC 27360**FEI Number:** 56-0751714**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 S. 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 SR VP-LEGAL AFFAIRS, GENERAL
COUNSEL, SECRETARY

Name PARR, ROSS

Address 500 OLD DOMINION WAY

City-State-Zip: THOMASVILLE NC 27360

Title SR VP-FINANCE, CFO, ASST.
SECRETARY

Name SATTERFIELD, ADAM

Address 500 OLD DOMINION WAY

City-State-Zip: THOMASVILLE NC 27360

Title EXECUTIVE CHAIRMAN OF THE
BOARD

Name CONGDON, DAVID S

Address 500 OLD DOMINION WAY

City-State-Zip: THOMASVILLE NC 27360

Title VP-ACCOUNTING & FINANCE

Name MAREADY, KIM S

Address 500 OLD DOMINION WAY

City-State-Zip: THOMASVILLE NC 27360

Title VP-TREASURER

Name SLATER, ANTHONY

Address 500 OLD DOMINION WAY

City-State-Zip: THOMASVILLE NC 27360

Title PRESIDENT, CEO

Name GANTT, GREG

Address 500 OLD DOMINION WAY

City-State-Zip: THOMASVILLE NC 27360

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: KIM MAREADY**VP ACCOUNTING &
FINANCE****03/09/2023**

Electronic Signature of Signing Officer/Director Detail

Date