

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F02000000982

**Entity Name:** DRIVELINE RETAIL MERCHANDISING, INC.**Current Principal Place of Business:**1141 E 1500 NORTH RD  
TAYLORVILLE, IL 62568**Current Mailing Address:**1141 E 1500 NORTH RD  
TAYLORVILLE, IL 62568 US**FEI Number:** 22-2049560**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**REGISTERED AGENT SOLUTIONS, INC.  
2894 REMINGTON GREEN LANE  
SUITE A  
TALLAHASSEE, FL 32308 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** CFO, SECRETARY, CONTROLLER,  
TREASURER**Name** BENNETT, LORI-ANNE M**Address** 1141 E 1500 NORTH RD**City-State-Zip:** TAYLORVILLE IL 62568**Title** CHIEF INFORMATION OFFICER**Name** MARTY, AMIT**Address** 1141 E 1500 NORTH RD**City-State-Zip:** TAYLORVILLE IL 62568**Title** CEO, PRESIDENT, DIRECTOR**Name** WILSON, LOYD R.**Address** 1141 E 1500 NORTH RD**City-State-Zip:** TAYLORVILLE IL 62568**Title** CHIEF ADMINISTRATIVE OFFICER**Name** KEARNEY, JOHN**Address** 1141 E 1500 NORTH RD**City-State-Zip:** TAYLORVILLE IL 62568**Title** CHIEF OPERATIONS OFFICER**Name** SHER, MICHELE**Address** 1141 E 1500 NORTH RD**City-State-Zip:** TAYLORVILLE IL 62568

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:** LLOYD R. WILSON**PRESIDENT****01/11/2024**

Electronic Signature of Signing Officer/Director Detail

Date