## **2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000002230

**Entity Name: DAIMLER TRUCKS REMARKETING CORPORATION** 

**FILED** Jan 30, 2020 Secretary of State 0224721083CC

Date

## **Current Principal Place of Business:**

4555 N. CHANNEL AVENUE

ATTENTION: CYNTHIA SCOTT HQ637B-LGL

PORTLAND, OR 97217

## **Current Mailing Address:**

4555 N. CHANNEL AVENUE

ATTENTION: CYNTHIA SCOTT HQ637B-LGL

PORTLAND, OR 97217 US

FEI Number: 94-2408781 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

C T CORPORATION SYSTEM 1200 SOUTH 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:

Officer/Director Detail:

Title DIRECTOR, CHAIRMAN Title DIRECTOR, PRESIDENT

Name NIELSEN. ROGER M. Name AUFDEMBERG, MARY

Address 4555 NORTH CHANNEL AVENUE Address 4555 NORTH CHANNEL AVENUE

ATTENTION: CYNTHIA SCOTT ATTENTION: CYNTHIA SCOTT

HQ637B-LGL HQ637B-LGL

PORTLAND OR 97217 City-State-Zip: PORTLAND OR 97217 City-State-Zip:

Title DIRECTOR, VICE PRESIDENT DIRECTOR Title **FINANCE** 

Name HOWARD, RICHARD Name O'LEARY, JOHN

Address 4555 NORTH CHANNEL AVENUE Address 4555 NORTH CHANNEL AVENUE

ATTENTION: CYNTHIA SCOTT ATTENTION: CYNTHIA SCOTT HQ637B-LGL

HQ637B-I GI PORTLAND OR 97217

City-State-Zip: PORTLAND OR 97217 City-State-Zip:

Title **SECRETARY** Title **TREASURER** Name BURTON, BRIAN

SCHNOERRINGER, UWE Name Address

4555 NORTH CHANNEL AVENUE 4555 NORTH CHANNEL AVENUE Address ATTENTION: CYNTHIA SCOTT

ATTENTION: CYNTHIA SCOTT HQ637B-LGL

Title

HQ637B-LGL PORTLAND OR 97217

City-State-Zip: City-State-Zip: PORTLAND OR 97217

Title ASSIATANT TREASURER

KURUC, MICHAEL Name

Name ARNAUT, EDUARDO Address 4555 NORTH CHANNEL AVENUE

4555 N. CHANNEL AVENUE ATTENTION: CYNTHIA SCOTT Address ATTENTION: CYNTHIA SCOTT

HQ637B-I GI HQ637B-LGL

PORTLAND OR 97217

City-State-Zip: PORTLAND OR 97217 City-State-Zip:

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. CHAIRMAN OF THE 01/30/2020 SIGNATURE: ROGER M. NIELSEN

**BOARD** 

ASSISTANT TREASURER