

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000000218

Entity Name: TRAVEL LITE, INC.

**Current Principal Place of Business:**

111 INNOVATION BLVD  
SYRACUSE, IN 46567

**Current Mailing Address:**

111 INNOVATION BLVD.  
SYRACUSE, IN 46567 US

FEI Number: 35-2043169

Certificate of Status Desired: No

**Name and Address of Current Registered Agent:**

INCORP SERVICES, INC.  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 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  
Name TIMMINS, JAIME  
Address 111 INNOVATION BLVD  
City-State-Zip: SYRACUSE IN 46567

Title CEO, COO  
Name REBAR, RYAN  
Address 111 INNOVATION BLVD  
City-State-Zip: SYRACUSE IN 46567

Title SECRETARY  
Name REIDENBACH, PJ  
Address 111 INNOVATION BLVD  
City-State-Zip: SYRACUSE IN 46567

Title DIRECTOR  
Name KORENSTRA, BRUCE  
Address 111 INNOVATION BLVD  
City-State-Zip: SYRACUSE IN 46567

Title DIRECTOR  
Name FILABAUM, MARK  
Address 111 INNOVATION BLVD  
City-State-Zip: SYRACUSE IN 46567

Title DIRECTOR  
Name MILLER, WAYNE  
Address 111 INNOVATION BLVD  
City-State-Zip: SYRACUSE IN 46567

Title DIRECTOR  
Name KORENSTRA, SAM  
Address 111 INNOVATION BLVD  
City-State-Zip: SYRACUSE IN 46567

Title DIRECTOR  
Name KORENSTRA, ROGER  
Address 111 INNOVATION BLVD  
City-State-Zip: SYRACUSE IN 46567

*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: JAIME TIMMINS

CFO

04/28/2022

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date