

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F97000001884

**Entity Name:** WABASH NATIONAL TRAILER CENTERS, INC.

**Current Principal Place of Business:**

1000 SAGAMORE PARKWAY SOUTH  
LAFAYETTE, IN 47905

**Current Mailing Address:**

PO BOX 6129  
ATTN: TAX DEPT  
LAFAYETTE, IN 47903 US

**FEI Number: 35-2012484**

**Certificate of Status Desired: No**

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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            PRESIDENT, DIRECTOR  
Name            PAGE, KEVIN J.  
Address        3900 MCCARTY, SUITE 200  
City-State-Zip: LAFAYETTE IN 47905

Title            SECRETARY  
Name            GLAZNER, M. KRISTIN  
Address        3900 MCCARTY, SUITE 200  
City-State-Zip: LAFAYETTE IN 47905

Title            VP, DIRECTOR  
Name            SMITH, DUSTIN T.  
Address        3900 MCCARTY, SUITE 200  
City-State-Zip: LAFAYETTE IN 47905

Title            TREASURER, DIRECTOR  
Name            PETTIT, MICHAEL N.  
Address        3900 MCCARTY, SUITE 200  
City-State-Zip: LAFAYETTE IN 47905

*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: M. KRISTIN GLAZNER**

**SECRETARY**

**04/29/2022**

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

\_\_\_\_\_  
Date