

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000005462

Entity Name: EQUIPMENTSHARE.COM, INC**Current Principal Place of Business:**5710 BULL RUN DRIVE
COLUMBIA, MO 65201**Current Mailing Address:**5710 BULL RUN DRIVE
COLUMBIA, MO 65201 US**FEI Number:** 47-2405753**Certificate of Status Desired:** No**Name and Address of Current 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:** DENISE BELL, ASST. SECRETARY

04/22/2021

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	CEO	Title	PRESIDENT
Name	SCHLACKS, JABBOK	Name	SCHLACKS, WILLIAM IV
Address	5710 BULL RUN DRIVE	Address	5710 BULL RUN DRIVE
City-State-Zip:	COLUMBIA MO 65201	City-State-Zip:	COLUMBIA MO 65201
Title	SECRETARY	Title	VP
Name	SCHLACKS, WILLIAM IV	Name	GRIFFIN, JOHN
Address	5710 BULL RUN DRIVE	Address	5710 BULL RUN DRIVE
City-State-Zip:	COLUMBIA MO 65201	City-State-Zip:	COLUMBIA MO 65201
Title	GENERAL COUNSEL	Title	CHAIRMAN OF THE BOARD
Name	GRIFFIN, JOHN	Name	SCHLACKS, JABBOK
Address	5710 BULL RUN DRIVE	Address	5710 BULL RUN DRIVE
City-State-Zip:	COLUMBIA MO 65201	City-State-Zip:	COLUMBIA MO 65201
Title	DIRECTOR	Title	DIRECTOR
Name	SCHLACKS, WILLIAM IV	Name	CHHEDA, NEIL
Address	5710 BULL RUN DRIVE	Address	151 TREMONT ST. 6F
City-State-Zip:	COLUMBIA MO 65201	City-State-Zip:	BOSTON MA 02111

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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: JABBOK SCHLACKS

CEO

04/22/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	MILLER, HARLEY
Address	190 NORTH 14TH ST. PH 300
City-State-Zip:	BROOKLYN NY 11249