

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F20000001771

**Entity Name:** EXPRESS FLEET SERVICE, INC.

**Current Principal Place of Business:**

1193 PORTLAND ST  
ST JOHNSBURY, VT 05819

**Current Mailing Address:**

1193 PORTLAND ST  
ST JOHNSBURY, VT 05819 US

**FEI Number: 03-0354779**

**Certificate of Status Desired: No**

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

CHAMBERLIN, TIMOTHY  
8039 N GOLFVIEW DR  
CITRUS SPRINGS, FL 34434 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 P  
Name WARD, WESLEY E  
Address 1193 PORTLAND ST  
City-State-Zip: ST JOHNSBURY VT 05819

Title VP  
Name WARD, PAULA M  
Address 1193 PORTLAND ST  
City-State-Zip: ST JOHNSBURY VT 05819

Title S  
Name WARD, LOIS D  
Address 1193 PORTLAND ST  
City-State-Zip: ST JOHNSBURY VT 05819

Title D  
Name WARD, LISA  
Address 1193 PORTLAND ST  
City-State-Zip: ST JOHNSBURY VT 05819

Title D  
Name WARD, RACHEL  
Address 1193 PORTLAND ST  
City-State-Zip: ST JOHNSBURY VT 05819

*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: WESLEY WARD**

**PRESIDENT**

**01/12/2021**

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

\_\_\_\_\_  
Date