



State of Rhode Island
and Providence Plantations
Office of the Secretary of State

A. Ralph Molis, Secretary of State
Corporations Division
148 W. River Street
Providence, RI 02904-2615
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

Filing Period: January 1 - March 1 • Filing Fee: \$50.00 • THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.

* In accordance with R.I.G.L. 7-1.2-1501(c), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c)(4)) is subject to a penalty fee of \$25.00.

1. Corporation ID No. 144917		2. Name of Corporation VELOCITY EXPRESS INC.			
3. Street Address Principal Business Office ONE MORNINGSID DRIVE NORTH		City WESTPORT	State CT	Zip 06880	
4. Business Phone No. 203-349-4191		5. State of Incorporation DELEWARE			
6. Brief Description of the Character of Business Conducted in Rhode Island SCHEDULED AND EXPEDITED LOGISTICS					
7. NAMES AND ADDRESSES OF THE OFFICERS: (*X BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name JEFFREY HENDRICKSON			Vice President Name MARK CALESIMO		
Street Address ONE MORNINGSID DRIVE NORTH			Street Address ONE MORNINGSID DRIVE NORTH		
City WESTPORT	State CT	Zip 06880	City WESTPORT	State CT	Zip 06880
Secretary Name MARK CALESIMO			Treasurer Name EDWARD W. STONE		
Street Address ONE MORNINGSID DRIVE NORTH			Street Address ONE MORNINGSID DRIVE NORTH		
City WESTPORT	State CT	Zip 06880	City WESTPORT	State CT	Zip 06880
8. NAMES AND ADDRESSES OF THE DIRECTORS: (*X BOX FOR ATTACHMENT) ☐ FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name EDWARD W. STONE			Director Name		
Street Address ONE MORNINGSID DRIVE NORTH			Street Address		
City WESTPORT	State CT	Zip 06880	City	State	Zip
Director Name			Director Name		
Street Address			Street Address		
City	State	Zip	City	State	Zip
9. SHARES AUTHORIZED 10000					
10. SHARES ISSUED: (*X BOX FOR ATTACHMENT) ☐ ISSUED SHARES — THIS SECTION MUST BE COMPLETED					
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.		Number of Shares 10,000		Class/Series Common	Par Value 1.01

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date	
Check No.	
By:	
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature **Mark T. Calesimo** Date **02/05/09**
Print or Type Name **MARK T. CALESIMO**
Title **Vice General Counsel**

FILED

Form 630 Rev. 08/08

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