



State of Rhode Island  
Department of State - Business Services Division

Annual Report for the year: 2024

Corporation

- Filing period: February 1 - May 1
- Filing Fee: \$50.00
- Penalty: Additional \$25.00 fee if form is not filed by May 31.

FILED TA...

MAY 10 2024

BY *[Signature]* 1641278/1611

1. Entity ID Number 000314344		2. Exact name of the Corporation Landstar Express America, Inc.			
3. Principal Office Address 13410 Sutton Park Drive South			City Jacksonville	State FL	Zip 32224
4. NAICS Code 484120		6. Brief description of the character of business conducted in Rhode Island Transportation Services			
5. State of Incorporation NC					
7. List ALL officers (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
President Name Vacant Position			Vice-President Name Margaret Rohan		
Street Address 13410 Sutton Park Drive South			Street Address 13410 Sutton Park Drive South		
City Jacksonville	State FL	Zip 32224	City Jacksonville	State FL	Zip 32224
Secretary Name Michael K. Kneller			Treasurer Name James P. Todd		
Street Address 13410 Sutton Park Drive South			Street Address 13410 Sutton Park Drive South		
City Jacksonville	State FL	Zip 32224	City Jacksonville	State FL	Zip 32224
8. List ALL directors (names and addresses) <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span>					
Director Name Frank A. Lonegro			Director Name Michael K. Kneller		
Street Address 13410 Sutton Park Drive South			Street Address 13410 Sutton Park Drive South		
City Jacksonville	State FL	Zip 32224	City Jacksonville	State FL	Zip 32224
Director Name James P. Todd			Director Name		
Street Address 13410 Sutton Park Drive South			Street Address		
City Jacksonville	State FL	Zip 32224	City	State	Zip
9. Shares Authorized <span style="float: right;">10. Shares Issued <span style="float: right;">Check the box to indicate an attachment <input type="checkbox"/></span></span>					
This information is currently of record in the Department of State.  Changes require an additional filing.		NUMBER OF SHARES		CLASS/SERIES	PAR VALUE
		1,000	Common	.01	
11. 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. <b>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.</b>					
Name of Authorized Representative Margaret Rohan - Vice President				Date 4/30/24	
Signature of Authorized Representative <i>Margaret Rohan</i>					

MAIL TO:  
Division of Business Services  
148 W. River Street, Providence, Rhode Island 02904-2615  
Phone: (401) 222-3040  
Website: www.sos.n.gov