

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000000642

Entity Name: TALLAHASSEE WINAIR CO.**Current Principal Place of Business:**870 BLOUNTSTOWN ST
SUITE 500
TALLAHASSEE, FL 32304-2766**Current Mailing Address:**C/O WGS - COMPLIANCE SERVICES
3110 KETTERING BLVD
MORaine, OH 45439-1924 US**FEI Number:** 30-0035411**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	HARSANY, RICHARD D
Address	870 BLOUNTSTOWN ST STE 500
City-State-Zip:	TALLAHASSEE FL 32304-2766

Title	TREASURER
Name	CULLER, SEAN W
Address	C/O WGS - COMPLIANCE SERVICES 3110 KETTERING BLVD
City-State-Zip:	MORaine OH 45439-1924

Title	DIRECTOR
Name	ATWELL, MICHAEL D.
Address	3110 KETTERING BLVD
City-State-Zip:	MORaine OH 45439-1924

Title	SECRETARY
Name	KIRKLAND, MICHAEL S.
Address	C/O WGS - COMPLIANCE SERVICES 3110 KETTERING BLVD
City-State-Zip:	MORaine OH 45439-1924

Title	DIRECTOR
Name	LYON, STEVEN E.
Address	3110 KETTERING BLVD
City-State-Zip:	MORaine OH 45439-1924

Title	DIRECTOR
Name	GERMAN, JOHN D
Address	5106 W CLIFTON ST
City-State-Zip:	TAMPA FL 33634

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: SEAN W. CULLER**TREASURER****04/19/2023**

Electronic Signature of Signing Officer/Director Detail

Date