

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001211

Entity Name: OCALA WINSUPPLY CO.

Current Principal Place of Business:

C/O WGS-COMPLIANCE SERVICES 3110 KETTERING BLVD
MORAIN, OH 45439

Current Mailing Address:

C/O WGS - COMPLIANCE SERVICES
3110 KETTERING BLVD
MORAIN, OH 45439 US

FEI Number: 26-2133725

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 JOHNSON, DON E

Address 1500 SW 17TH AVE #300

City-State-Zip: OCALA FL 34471

Title DIRECTOR

Name LARKIN, DENNIS M

Address C/O WGS-COMPLIANCE SERVICES
3110 KETTERING BLVD

City-State-Zip: MORAIN OH 45439

Title DIRECTOR

Name MUEGEL, PHILIP E

Address 1000 HURRICANE SHOALS RD C-100

City-State-Zip: LAWRENCEVILLE GA 30043

Title TREASURER

Name CULLER, SEAN W

Address C/O WGS-COMPLIANCE SERVICES
3110 KETTERING BLVD

City-State-Zip: MORAIN OH 45439

Title DIRECTOR

Name SALSMAN, MONTE L

Address C/O WGS-COMPLIANCE SERVICES
3110 KETTERING BLVD

City-State-Zip: MORAIN OH 45439

Title SECRETARY

Name KIRKLAND, MICHAEL S.

Address C/O WGS-COMPLIANCE SERVICES
3110 KETTERING BLVD

City-State-Zip: MORAIN OH 45439

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

04/26/2016

Electronic Signature of Signing Officer/Director Detail

Date