

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000001211

Entity Name: OCALA WINNELSON CO.

FILED
Feb 22, 2012
Secretary of State

Current Principal Place of Business:

3661 SOUTH PINE AVE
OCALA, FL 344716610

New Principal Place of Business:

Current Mailing Address:

1000 HURRICANE SHOALS RD. C-100
LAWRENCEVILLE, GA 30043

New Mailing Address:

FEI Number: 26-2133725

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: CP
Name: JOHNSON, DON
Address: 3661 SOUTH PINE AVE
City-St-Zip: OCALA, FL 344716610

Title: D
Name: LARKIN, DENNIS M
Address: 1000 HURRICANE SHOALS ROAD NE BLDG C100
City-St-Zip: LAWRENCEVILLE, GA 300434826

Title: DVP
Name: BOHANNON, RON
Address: 3110 KETTERING BLVD
City-St-Zip: DAYTON, OH 454396610

Title: ST
Name: MUEGEL, PHILIP E
Address: 1000 HURRICANE SHOALS RD NE BLDG C100
City-St-Zip: LAWRENCEVILLE, GA 344434826

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: ANITA LEFTY

_____ Electronic Signature of Signing Officer or Director

AGT

02/22/2012

_____ Date