

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000003496

**Entity Name:** ROCKLEDGE WINSUPPLY CO.

**Current Principal Place of Business:**

245 GUS HIPPI BLVD  
SUITE 500  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

1000 HURRICANE SHOALS RD  
SUITE C-100  
LAWRENCEVILLE, GA 30043 US

**FEI Number:** 46-0832284

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST  
TALLAHASSEE, FL 32301 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 CP  
Name LITTON, RALPH M  
Address 245 GUS HIPPI BLVD  
SUITE 500  
City-State-Zip: ROCKLEDGE FL 32955

Title VPVC  
Name SALSMAN, MONTE L  
Address 3110 KETTERING BLVD  
City-State-Zip: DAYTON OH 45439

Title STD  
Name MUEGEL, PHILIP E  
Address 1000 HURRICANE SHOALS RD C-100  
City-State-Zip: LAWRENCEVILLE GA 30043-4826

Title D  
Name CARTER, JOHN M  
Address 2813 FLIGHT SAFETY DR  
City-State-Zip: VERO BEACH FL 32960-7911

Title D  
Name LARKIN, DENNIS M  
Address 1000 HURRICANE SHOALS RD C-100  
City-State-Zip: LAWRENCEVILLE GA 30043-4826

*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:** PHILIP E. MUEGEL

**REGIONAL FINANCIAL  
OFFICER**

01/07/2015

Electronic Signature of Signing Officer/Director Detail

Date