

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000003496

**FILED**  
**Apr 26, 2016**  
**Secretary of State**  
**CC3179745651**

**Entity Name:** ROCKLEDGE WINSUPPLY CO.

**Current Principal Place of Business:**

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

**Current Mailing Address:**

C/O WGS - COMPLIANCE SERVICES  
3110 KETTERING BLVD  
MORaine, OH 45439 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           PRESIDENT & DIRECTOR  
Name           LITTON, RALPH M  
Address        245 GUS HIPP BLVD  
                  STE 500  
City-State-Zip: ROCKLEDGE FL 32955

Title           DIRECTOR  
Name           SALSMAN, MONTE L  
Address        C/O WGS-COMPLIANCE SERVICES  
                  3110 KETTERING BLVD  
City-State-Zip: MORaine OH 45439

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

Title           DIRECTOR  
Name           CARTER, JOHN M  
Address        9030 17TH PL  
City-State-Zip: VERO BEACH FL 32966

Title           DIRECTOR  
Name           MCCULLOUGH, ROBERT F  
Address        C/O WGS-COMPLIANCE SERVICES  
                  3110 KETTERING BLVD  
City-State-Zip: MORaine OH 45439

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

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