

**2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F98000002211

**Entity Name:** WMS INDUSTRIES INC.

**Current Principal Place of Business:**

800 S NORTHPOINT BLVD  
WAUKEGAN, IL 60085

**Current Mailing Address:**

800 S NORTHPOINT BLVD  
WAUKEGAN, IL 60085

**FEI Number:** 36-2814522

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name            HUNTLEY, WILLIAM J  
Address        1500 BLUEGRASS LAKES PARKWAY  
City-State-Zip: ALPHARETTA GA 30004

Title            VP  
Name            SCHWEINFURTH, SCOTT D  
Address        800 S NORTHPOINT BLVD  
City-State-Zip: WAUKEGAN IL 60085

Title            GENERAL COUNSEL, SECRETARY,  
                    DIRECTOR  
Name            SARNO, JACK B  
Address        750 LEXINGTON AVENUE, 25TH FLR  
City-State-Zip: NEW YORK NY 10022

Title            VP, DIRECTOR  
Name            METCALFE, JAMES R  
Address        1500 BLUEGRASS LAKES PARKWAY  
City-State-Zip: ALPHARETTA GA 30004

*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:** JACK B. SARNO

**GENERAL COUNSEL AND    04/21/2014**  
**SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date