

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01872

FILED  
Jan 14, 2011  
Secretary of State

**Entity Name:** ADVANCED DRAINAGE SYSTEMS, INC.

**Current Principal Place of Business:**

4640 TRUEMAN BLVD  
HILLARD, OH 43026

**New Principal Place of Business:**

**Current Mailing Address:**

4640 TRUEMAN BLVD  
HILLARD, OH 43026

**New Mailing Address:**

**FEI Number:** 51-0105665

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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: CCEO  
Name: CHLAPATY, JOSEPH A  
Address: 4640 TRUEMAN BLVD  
City-St-Zip: HILLIARD, OH 43026

Title: PCOO  
Name: CHLAPATY, JOSEPH A  
Address: 4640 TRUEMAN BLVD  
City-St-Zip: HILLIARD, OH 43026

Title: VP  
Name: FUSSNER, THOMAS M  
Address: 4640 TRUEMAN BLVD  
City-St-Zip: HILLIARD, OH 43026

Title: VPF  
Name: STURGEON, MARK B  
Address: 4640 TRUEMAN BLVD  
City-St-Zip: HILLIARD, OH 43026

Title: VP  
Name: HAAG, JAMES C  
Address: 4640 TRUEMAN BLVD  
City-St-Zip: HILLIARD, OH 43026

Title: D  
Name: HAVENS, JOHN F  
Address: 2151 GULF SHORE BLVD APT 109  
City-St-Zip: NAPLES, FL 34102

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: MARK B. STURGEON

VP

01/14/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date