## 2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01872

Entity Name: ADVANCED DRAINAGE SYSTEMS, INC.

**Current Principal Place of Business:** 

4640 TRUEMAN BLVD HILLARD, OH 43026

**Current Mailing Address:** 

4640 TRUEMAN BLVD HILLARD, OH 43026

FEI Number: 51-0105665 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 S. 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

**FILED** Feb 09, 2017

**Secretary of State** 

CC4096637995

Officer/Director Detail:

Title **CCEO** Title PCO<sub>0</sub>

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

VPF Title Title VΡ

Name COTTRILL, SCOTT Name FUSSNER, THOMAS M Address 4640 TRUEMAN BLVD Address 4640 TRUEMAN BLVD HILLIARD OH 43026 City-State-Zip: HILLIARD OH 43026 City-State-Zip:

Title D

HAVENS, JOHN F Name

2151 GULF SHORE BLVD APT 109 Address

City-State-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: SCOTT COTTRILL

Electronic Signature of Signing Officer/Director Detail

**VPF** 

02/09/2017 Date