

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M22000018127

Entity Name: PROF COMP SOLUTIONS, LLC**Current Principal Place of Business:**3710 TIMBERLINE DR
DENISON, IA 51442**Current Mailing Address:**P.O. BOX 70
DENISON, IA 51442**FEI Number:** 83-2207264**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**COGENCY GLOBAL INC.
115 N CALHOUN ST STE 4
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

Authorized Person(s) Detail :

Title MEMBER
Name BOWERS, JOHN
Address P. O. BOX 49
City-State-Zip: SELMER TN 38375-0049

Title PRESIDENT OF BOD
Name GILLESPIE, GREG
Address P. O. BOX 296
City-State-Zip: CLINTON TN 37717-0296

Title MEMBER
Name GLIDEWELL, ALLAN
Address P.O. BOX 9
City-State-Zip: YOUNG HARRIS GA 30582-0009

Title VP
Name HENDRIX, SCOTT
Address P. O. DRAWER 1789
City-State-Zip: TUPELO MS 38802-1789

Title MEMBER
Name CROSS, DAVE
Address P. O. BOX 4669
City-State-Zip: ONEIDA TN 37841-4669

Title MEMBER
Name GILLESPIE, DARRELL
Address P. O. BOX 627
City-State-Zip: DICKSON TN 37056-0627

Title MEMBER
Name HENDERSON, TIM
Address P. O. BOX 2730
City-State-Zip: CLEVELAND TN 37320-2730

Title MEMBER
Name KIRK, TONY
Address P.O. BOX 188
City-State-Zip: BOLIVAR TN 38008-0188

Continues on page 2

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANYEL JEPSEN**MEMBER****04/14/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MEMBER
Name NEWMAN, BEN
Address P. O. BOX 272
City-State-Zip: MCMINNVILLE TN 37111-0272

Title MEMBER
Name SMART, DAVID
Address P. O. BOX 589
City-State-Zip: MAYFIELD KY 42066-0589

Title MEMBER
Name WEBB, WILSON
Address P. O. BOX 849
City-State-Zip: LOUISVILLE MS 39339-0849

Title SR. VICE PRESIDENT-FINANCE
Name JEPSEN, DANYEL
Address 3710 TIMBERLINE DR
City-State-Zip: DENISON IA 51442

Title GENERAL MANAGER / CEO / SECRETARY-
TREASURER / CFO
Name BLASSINGAME, SCOTT
Address P. O. BOX 3480
City-State-Zip: TUPELO MS 38803-3480

Title MEMBER
Name SITTASON, BOB
Address P.O. BOX 488
City-State-Zip: HARTSELLE AL 35640-0488

Title MEMBER
Name VOWELL, DALE
Address P. O. BOX 418
City-State-Zip: RUSSELLVILLE KY 42276-0418

Title GENERAL COUNSEL
Name FORD, DOUGLAS
Address P. O. BOX 1366
City-State-Zip: COLUMBUS MS 39703-1366

Title GENERAL MANAGER OF PCS
DIVISION
Name MILLER, ANGELA
Address 3710 TIMBERLINE DR
City-State-Zip: DENISON IA 51442

Title ASSISTANT GENERAL MANAGER /
CTO CENTRAL SERVICE AS
Name DYER, STEVEN
Address P. O. BOX 3480
City-State-Zip: TUPELO MS 38803-3480