

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 824029

Entity Name: MECS, INC.

**Current Principal Place of Business:**

974 CENTRE ROAD  
WILMINGTON, DE 19805

**FILED**  
**Apr 22, 2021**  
**Secretary of State**  
**7981928958CC**

**Current Mailing Address:**

974 CENTRE ROAD  
PO BOX 1039  
WILMINGTON, DE 19805 US

**FEI Number: 36-2684183**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
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            CEO, DIRECTOR  
Name            KEMP, JON D  
Address        974 CENTRE ROAD  
                  P.O. BOX 2915  
City-State-Zip: WILMINGTON DE 19805

Title            VP  
Name            SCHALL, KIRK  
Address        974 CENTRE ROAD  
                  P.O. BOX 2915  
City-State-Zip: WILMINGTON DE 19805

Title            TREASURER  
Name            WALCK, ANDREW  
Address        974 CENTRE ROAD  
                  P.O. BOX 2915  
City-State-Zip: WILMINGTON DE 19805

Title            SECRETARY  
Name            FEUER, MICHAEL A  
Address        974 CENTRE ROAD  
                  P.O. BOX 2915  
City-State-Zip: WILMINGTON DE 19805

Title            ASST. TREASURER  
Name            NOVAIS, PAULA  
Address        974 CENTRE ROAD  
                  P.O. BOX 2915  
City-State-Zip: WILMINGTON DE 19805

Title            ASST. SECRETARY  
Name            SHARPE, LORIANN LEA  
Address        974 CENTRE ROAD  
                  P.O. BOX 2915  
City-State-Zip: WILMINGTON DE 19805

*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: ANDREW WALCK**

**TREASURER**

**04/22/2021**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date