## 2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F0000003109

Entity Name: CINTAS CORPORATION NO. 2

**Current Principal Place of Business:** 

6800 CINTAS BOULEVARD MASON, OH 45040

**Current Mailing Address:** 

6800 CINTAS BOULEVARD MASON, OH 45040

FEI Number: 31-1703809 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET 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

**FILED** Apr 12, 2018

**Secretary of State** 

CC6518465942

Officer/Director Detail :

Title SR. VP, CFO, DIRECTOR Title ASST. SECRETARY HANSEN, J MICHAEL Name Name FOLEY, JOSEPH

6800 CINTAS BOULEVARD Address Address 7251 SALISBURY ROAD, SUITE 1

City-State-Zip: JACKSONVILLE FL 32256 MASON OH 45040 City-State-Zip:

Title DIRECTOR, CEO Title ASST. SECRETARY Name FARMER, SCOTT D FORTNER, TOM Name

Address 6800 CINTAS BOULEVARD Address 7251 SALISBURY ROAD

SUITE 1

JACKSONVILLE FL 32256 City-State-Zip:

Title DIRECTOR Title SECRETARY, DIRECTOR, VP

Name WARD, RODNEY W FROOMAN, THOMAS E Name

Address 6800 CINTAS BOULEVARD Address 6800 CINTAS BOULEVARD

City-State-Zip: MASON OH 45040

City-State-Zip: MASON OH 45040

Title ASST. SECRETARY PRESIDENT, COO Title

Name LAHTI, TOMI Name HOLLOMAN, J P

7251 SALISBURY ROAD Address Address 6800 CINTAS BOULEVARD

SUITE 1

MASON OH 45040

JACKSONVILLE FL 32256 City-State-Zip: City-State-Zip: MASON OH 45040

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City-State-Zip:

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: J MICHAEL HANSEN

04/12/2018 SR. VP & CFO, DIRECTOR

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title ASST. SECRETARY
Name HERB, STEPHEN

Address 7251 SALISBURY ROAD

SUITE 1

City-State-Zip: JACKSONVILLE FL 32256

Title TREASURER, VP Name ADLER, PAUL

Address 6800 CINTAS BOULEVARD

City-State-Zip: MASON OH 45040

Title ASST. SECRETARY

Name SKUFCA, CHRISTOPHER

Address 6800 CINTAS BOULEVARD

City-State-Zip: MASON OH 45040

Title ASST. SECRETARY
Name DENTON, D. BROCK

Address 6800 CINTAS BOULEVARD

City-State-Zip: MASON OH 45040

Title ASST. SECRETARY
Name RAGSDALE, MICHAEL
Address 7251 SALISBURY ROAD

SUITE 1

City-State-Zip: JACKSONVILLE FL 32256

Title VP

Name BRUSCATO, JAY

Address 6800 CINTAS BOULEVARD

City-State-Zip: MASON OH 45040

Title VP

Name AMANN, JOHN

Address 6800 CINTAS BOULEVARD

City-State-Zip: MASON OH 45040