#### 2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000003704

Entity Name: NATIONAL COATINGS & SUPPLIES, INC.

**FILED** Apr 30, 2015 **Secretary of State** CC4409363594

# **Current Principal Place of Business:**

4900 FALLS OF NEUSE ROAD, SUITE 150

RALEIGH, NC 27609

## **Current Mailing Address:**

4900 FALLS OF NEUSE ROAD, SUITE 150 RALEIGH, NC 27609 US

FEI Number: 26-3594506 Certificate of Status Desired: No

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

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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:

Date Electronic Signature of Registered Agent

Officer/Director Detail :

Title TREASURER, SVP Title **SECRETARY** MYERS, JAMES R. Name Name MOLIN, NANCY J

Address 4900 FALLS OF NEUSE ROAD, SUITE Address 4900 FALLS OF NEUSE ROAD, SUITE

City-State-Zip: RALEIGH NC 27609 City-State-Zip: RALEIGH NC 27609

Title ASSISTANT SECRETARY Title CHAIRMAN, DIRECTOR Name SCHARNHORST, WAYNE Name SLOAN, O. TEMPLE JR.

4900 FLLS OF NEUSE RD, SUITE 150 4900 FALLS OF NEUSE RD., SUITE Address Address

150

4900 FALLS OF NEUSE RD., SUITE

RALEIGH NC 27609 City-State-Zip: City-State-Zip: RALEIGH NC 27609

Title DIRECTOR

Title **CHAIRMAN** SLOAN, O. TEMPLE III Name

Name BEESON, CURTIS F. 4900 FALLS OF NEUSE RD., SUITE Address

Address 150

RALEIGH NC 27609 City-State-Zip: City-State-Zip: RALEIGH NC 27609

150

DIRECTOR Title Title DIRECTOR, SVP

SLOAN, C. HAMILTON Name HENLINE, CLIFFORD H. JR. Name

4900 FALLS OF NEUSE RD., SUITE Address 4900 FALLS OF NEUSE RD., SUITE Address

City-State-Zip: RALEIGH NC 27609 City-State-Zip: RALEIGH NC 27609

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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.

04/30/2015 SIGNATURE: MATTHEW S. HARDING VP/GENERAL COUNSEL

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

**DIRECTOR** Title Title PRESIDENT, DIRECTOR Name LOFTIN, JAY JR. Name LAVRACK, WAYNE D.

Address 4900 FALLS OF NEUSE RD., SUITE 150 Address 4900 FALLS OF NEUSE RD., SUITE 150

City-State-Zip: RALEIGH NC 27609 City-State-Zip:

**DIRECTOR** Title

Title EVNAS, CARLOS E Name

Name SLOAN, C HAMILTON JR. 4900 FALLS OF NEUSE ROAD, SUITE 150 Address

Address 4900 FALLS OF NEUSE ROAD, SUITE City-State-Zip: RALEIGH NC 27609

RALEIGH NC 27609 City-State-Zip: Title CFO

Title **VP & GENERAL COUNSEL** BEESON, CURTIS F Name Name HARDING, MATTHEW S Address 4900 FALLS OF NEUSE ROAD, SUITE 150

Address 4900 FALLS OF NEUSE ROAD, SUITE City-State-Zip: RALEIGH NC 27609

150

RALEIGH NC 27609

DIRECTOR

City-State-Zip: RALEIGH NC 27609