

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F09000004428

Entity Name: PENSACOLA WINSUPPLY CO.**Current Principal Place of Business:**3727 N PALAFOX ST
PENSACOLA, FL 32505**Current Mailing Address:**C/O WGS - COMPLIANCE SERVICES
3110 KETTERING BLVD
MORAINE, OH 45439 US**FEI Number:** 27-1255661**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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title PRESIDENT & DIRECTOR
Name MCCRORY, MARTY D
Address 3727 N PALAFOX ST
City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR
Name JARMAN, MARCUS W
Address 3727 N PALAFOX ST
City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR
Name LARKIN, DENNIS M
Address 3110 KETTERING BLVD
City-State-Zip: MORaine OH 45439

Title SECRETARY & DIRECTOR
Name MUEGEL, PHILIP E
Address 1000 HURRICANE SHOALS RD C-100
City-State-Zip: LAWRENCEVILLE GA 30043

Title TREASURER
Name CULLER, SEAN W
Address 3110 KETTERING BLVD
City-State-Zip: MORaine OH 45439

Title DIRECTOR
Name MCCULLOUGH, ROBERT F
Address 3110 KETTERING BLVD
City-State-Zip: MORaine OH 45439

Title DIRECTOR
Name SALSMAN, MONTE L
Address 3110 KETTERING BLVD
City-State-Zip: MORaine OH 45439

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: SEAN W CULLER**TREASURER****04/22/2015**_____
Electronic Signature of Signing Officer/Director Detail_____
Date