

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F09000004428

**Entity Name:** PENSACOLA WINSUPPLY CO.**Current Principal Place of Business:**C/O WGS - COMPLIANCE SERVICES  
3110 KETTERING BLVD  
MORaine, OH 45439**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 &amp; DIRECTOR

Name MCCRORY, MARTY D

Address 3727 N PALAFOX ST

City-State-Zip: PENSACOLA FL 32505

Title TREASURER

Name CULLER, SEAN W

Address C/O WGS - COMPLIANCE SERVICES  
3110 KETTERING BLVD

City-State-Zip: MORaine OH 45439

Title DIRECTOR

Name MCCULLOUGH, ROBERT F

Address C/O WGS - COMPLIANCE SERVICES  
3110 KETTERING BLVD

City-State-Zip: MORaine OH 45439

Title DIRECTOR

Name SALSMAN, MONTE L

Address C/O WGS - COMPLIANCE SERVICES  
3110 KETTERING BLVD

City-State-Zip: MORaine OH 45439

Title SECRETARY

Name KIRKLAND, MICHAEL S

Address C/O WGS - COMPLIANCE SERVICES  
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: MICHAEL S. KIRKLAND****SECRETARY****01/04/2019**

Electronic Signature of Signing Officer/Director Detail

Date