

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000003720

**FILED**  
**Mar 26, 2018**  
**Secretary of State**  
**CC7804723053**

**Entity Name:** HOME DELIVERY INCONTINENT SUPPLIES, CO.

**Current Principal Place of Business:**

9385 DIELMAN INDUSTRIAL DR  
OLIVETTE, MO 63132

**Current Mailing Address:**

9385 DIELMAN INDUSTRIAL DR  
OLIVETTE, MO 63132 US

**FEI Number:** 43-1511171

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
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:** MIKE JONES, ASSISTANT SECRETARY

03/26/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            NEDVIN, MARK  
Address        9385 DIELMAN INDUSTRIAL DR  
City-State-Zip: OLIVETTE MO 63132

Title            VP OF HUMAN RESOURCES  
Name            HENDRICKS, JENNIFER  
Address        9385 DIELMAN INDUSTRIAL DR  
City-State-Zip: OLIVETTE MO 63132

Title            VP DIRECT CONSUMER, DIRECTOR  
Name            GOODWIN, BRAD  
Address        8020 ARCO CORPORATE DRIVE  
                 SUITE 200  
City-State-Zip: RALEIGH NC 27617

Title            SECRETARY  
Name            THEODORU, RAZVAN  
Address        234 KINGSLEY PARK DRIVE  
City-State-Zip: FORT MILL SC 29715

Title            DIRECTOR  
Name            LEMIEUX, MARCY  
Address        8020 ARCO CORPORATE DRIVE,  
                 SUITE 200  
City-State-Zip: RALEIGH NC 27617

Title            ASSISTANT SECRETARY  
Name            MIREAULT, JOSEE  
Address        395 DE MAISONNEUVE W  
City-State-Zip: MONTREAL QUEBEC H3A 1L6

Title            DIRECTOR  
Name            BURON, DANIEL  
Address        395 DE MAISONNEUVE W  
City-State-Zip: MONTREAL QUEBEC H3A 1L6

Title            DIRECTOR  
Name            FAGAN, MICHAEL  
Address        8020 ARCO CORPORATE DRIVE  
                 SUITE 200  
City-State-Zip: RALEIGH NC 27617

*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:** JOSEE MIREAULT

ASSISTANT SECRETARY    03/26/2018

Electronic Signature of Signing Officer/Director Detail

Date