

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F12000001223

**Entity Name:** OVERBY-SEAWELL COMPANY**Current Principal Place of Business:**245 TOWNPARK DRIVE  
RAVINE ONE SUITE 200  
KENNESAW, GA 30144**Current Mailing Address:**245 TOWNPARK DRIVE  
RAVINE ONE SUITE 200  
KENNESAW, GA 30144 US**FEI Number:** 58-1724261**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**Officer/Director Detail :**

Title	TREASURER
Name	WILLOUGHBY, CHESLEY
Address	245 TOWNPARK DRIVE RAVINE ONE SUITE 200
City-State-Zip:	KENNESAW GA 30144

Title	DIRECTOR
Name	KOVACH, JEFF
Address	245 TOWNPARK DRIVE RAVINE ONE SUITE 200
City-State-Zip:	KENNESAW GA 30144

Title	DIRECTOR
Name	CHOCK, CARTY
Address	245 TOWNPARK DRIVE RAVINE ONE SUITE 200
City-State-Zip:	KENNESAW GA 30144

Title	PRESIDENT
Name	GILROY, KEITH
Address	245 TOWNPARK DRIVE RAVINE ONE SUITE 200
City-State-Zip:	KENNESAW GA 30144

Title	SECRETARY, TREASURER
Name	CRUZ, ANGEL
Address	245 TOWNPARK DRIVE RAVINE ONE SUITE 200
City-State-Zip:	KENNESAW GA 30144

*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:** ANGEL CRUZ**SECRETARY****01/28/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date