

2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F14000003718

Entity Name: INSOURCE OF VA, INC.

Current Principal Place of Business:

80 SUMMIT VIEW LANE
BASTIAN, VA 24314

FILED
Feb 19, 2016
Secretary of State
CC3365161310

Current Mailing Address:

80 SUMMIT VIEW LANE
BASTIAN, VA 24314 US

FEI Number: 54-1605740

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 VP, SECRETARY, DIRECTOR
Name ETTINGER, MICHAEL S
Address C/O HENRY SCHEIN, INC. 135
DURYEA RD,E-365
City-State-Zip: MELVILLE NY 11747

Title VP, DIRECTOR
Name MLOTEK, MARK E
Address C/O HENRY SCHEIN, INC. 135
DURYEA RD,E-365
City-State-Zip: MELVILLE NY 11747

Title PRESIDENT
Name BRESLAWSKI, JAMES P
Address C/O HENRY SCHEIN, INC. 135
DURYEA RD,E-365
City-State-Zip: MELVILLE NY 11747

Title VP, CFO, DIRECTOR
Name PALADINO, STEVEN
Address C/O HENRY SCHEIN, INC. 135
DURYEA RD,E-365
City-State-Zip: MELVILLE NY 11747

Title VP
Name CRAWFORD, CHARLES D
Address C/O HENRY SCHEIN, INC. 135
DURYEA RD,E-365
City-State-Zip: MELVILLE NY 11747

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 ETTINGER

SECRETARY

02/19/2016

Electronic Signature of Signing Officer/Director Detail

Date