2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000003593

Entity Name: ECOFLO SOUTHEAST, INC.

Current Principal Place of Business:

18500 NORTH ALLIED WAY PHOENIX, AZ 85054

Current Mailing Address:

18500 NORTH ALLIED WAY PHOENIX, AZ 85054 US

FEI Number: 20-5396206 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 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:

Electronic Signature of Registered Agent

Date

FILED Apr 21, 2024

Secretary of State

2386661049CC

Officer/Director Detail :

Title DIRECTOR Title **PRESIDENT**

CARLSEN, ELYSE M. ARAMBULA, JULIA Name Name

18500 NORTH ALLIED WAY 18500 NORTH ALLIED WAY Address Address

City-State-Zip: PHOENIX AZ 85054 PHOENIX AZ 85054 City-State-Zip:

VΡ Title Title VΡ

Name MACALUSO, JAMES M. Name KANG, RICHARD D.

Address 6 SHIRE DRIVE Address 18500 NORTH ALLIED WAY

City-State-Zip: NORFOLK MA 02056 City-State-Zip: PHOENIX AZ 85054

Title VP. ASSISTANT SECRETARY Title **TREASURE**

Name KASARJIAN, ASHLEY Name BOYD, CALVIN R.

Address 18500 NORTH ALLIED WAY 18500 NORTH ALLIED WAY Address

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054

Title VP. ASSISTANT SECRETARY Title VP, TAX

Name WILHOIT, ADRIENNE W. FOCAZIO, LAWRENCE D. Name 18500 NORTH ALLIED WAY

Address 18500 NORTH ALLIED WAY Address

City-State-Zip: PHOENIX AZ 85054 PHOENIX AZ 85054 City-State-Zip:

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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.

04/21/2024 SIGNATURE: LAUREN MCKEON **SECRETARY**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP, ASSISTANT SECRETARY Title SECRETARY

Name NICKERSON, JOHN B. Name MCKEON, LAUREN

Address 18500 NORTH ALLIED WAY Address 18500 NORTH ALLIED WAY

City-State-Zip: PHOENIX AZ 85054 City-State-Zip: PHOENIX AZ 85054