

2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F22000005355

Entity Name: HYDROLOGIC DISTRIBUTION COMPANY**Current Principal Place of Business:**6365 53RD ST N,
100
PINELLAS PARK, FL 33781**Current Mailing Address:**C/O WGS - COMPLIANCE SERVICES
3110 KETTERING BLVD.
MORaine, OH 45439-1924 US**FEI Number:** 88-3761983**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, DIRECTOR
Name	LYNCH, CHRISTOPHER
Address	6365 53RD ST N
City-State-Zip:	PINELLAS PARK FL 33781

Title	VICE PRESIDENT, DIRECTOR
Name	CURRY, PAUL R.
Address	6365 53RD ST N
City-State-Zip:	PINELLAS PARK FL 33781

Title	DIRECTOR, VP
Name	GHOMLEY, JASON J.
Address	6365 53RD ST N
City-State-Zip:	PINELLAS PARK FL 33781

Title	SECRETARY
Name	KIRKLAND, MICHAEL S.
Address	3110 KETTERING BLVD.
City-State-Zip:	MORaine OH 45439-1924

Title	TREASURER
Name	CULLER, SEAN W.
Address	3110 KETTERING BLVD.
City-State-Zip:	MORaine OH 45439-1924

Title	DIRECTOR, ASST. SECRETARY
Name	HOLBROCK, GREGORY T.
Address	3110 KETTERING BLVD.
City-State-Zip:	MORaine OH 45439-1924

Title	DIRECTOR
Name	ATWELL, MICHAEL D.
Address	3110 KETTERING BLVD.
City-State-Zip:	MORaine OH 45439-1924

Title	DIRECTOR
Name	FERGUSON, ROBERT W.
Address	3110 KETTERING BLVD.
City-State-Zip:	MORaine OH 45439-1924

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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.

SIGNATURE: SEAN W. CULLER**TREASURER****01/20/2025**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name DITOMMASO, ROBERT P.
Address 3110 KETTERING BLVD.
City-State-Zip: MORaine OH 45439-1924

Title ASST. SECRETARY
Name MAY, GARY L
Address C/O WGS - COMPLIANCE SERVICES
 3110 KETTERING BLVD.
City-State-Zip: MORaine OH 45439-1924