

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002555

Entity Name: ERGON, INC.**Current Principal Place of Business:**2829 LAKELAND DR
FLOWOOD, MS 39232**Current Mailing Address:**P.O. BOX 1639
JACKSON, MS 39215-1639 US**FEI Number:** 64-0503423**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
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

Officer/Director Detail :

Title SECRETARY
Name STONE, KATHRYN W
Address 2829 LAKELAND DR.
City-State-Zip: FLOWOOD MS 39232

Title DIRECTOR
Name LAMPTON, WILLIAM W
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title DIRECTOR
Name LAMPTON, ROBERT H
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title VP, CFO
Name WALL, ALAN
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title VP
Name YOUNG, PAUL
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title VP, TREASURER
Name HODGES, KENNETH E
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title PRESIDENT
Name PATRICK, KRIS
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title VP
Name WITT, NATHAN
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

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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: ALAN WALL

EXEC VP & CFO

04/26/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name BRANNON, JANA
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title DIRECTOR
Name KNUDSON, THOMAS
Address 2829 LAKELAND DRIVE
City-State-Zip: FLOWOOD MS 39232

Title DIRECTOR
Name HADDOX, EMMITTE J
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title DIRECTOR
Name LAMPTON, LESLIE BARTON IV
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title DIRECTOR
Name GILBANE, THOMAS JR
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title VP
Name NATION, PATRICK
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title VP
Name PASTOREK, JOEL
Address 2829 LAKELAND DRIVE
City-State-Zip: FLOWOOD MS 39232

Title VP
Name PUCKETT, LANCE
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title DIRECTOR
Name WALKER, AMY LAMPTON
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title VP
Name AUSTIN, YULIA
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232

Title DIRECTOR
Name HAUGH, DOUG
Address 2829 LAKELAND DR
City-State-Zip: FLOWOOD MS 39232