

2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P21894

Entity Name: SUPPLY NETWORK, INC.**Current Principal Place of Business:**5150 BELTWAY DR SE
CALEDONIA, MI 49316**Current Mailing Address:**5150 BELTWAY DR SE
CALEDONIA, MI 49316 US**FEI Number:** 38-2806071**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	DIRECTOR
Name	GOLINVEAUX, JAMES
Address	5150 BELTWAY DR SE
City-State-Zip:	CALEDONIA MI 49316

Title	TREASURER
Name	JAMIE, HALFMANN
Address	5150 BELTWAY DR SE
City-State-Zip:	CALEDONIA MI 49316

Title	PRESIDENT
Name	BOSMA, MICHAEL
Address	5150 BELTWAY DR SE
City-State-Zip:	CALEDONIA MI 49316

Title	DIRECTOR
Name	HALFMANN, JAMIE
Address	5150 BELTWAY DR SE
City-State-Zip:	CALEDONIA MI 49316

Title	DIRECTOR
Name	BOSMA, MICHAEL
Address	5150 BELTWAY DR SE
City-State-Zip:	CALEDONIA MI 49316

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: JAMIE HALFMANN

TREASURER

04/30/2024

Electronic Signature of Signing Officer/Director Detail_____
Date