2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2009
Secretary of State

DOCUMENT# F98000006552

Entity Name: VALDOSTA WINNELSON CO.

Current Principal Place of Business:

2517-H BEMIS ROAD
VALDOSTA, GA 31601

New Principal Place of Business:

Current Mailing Address:

1000 HURRICANE SHOALS RD
C-100
LAWRENCEVILLE, GA 30043

New Mailing Address:

FEI Number: 58-2424479 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title:	PD	( ) Delete
Name:	YOUNG, STEWART C SR	
Address:	2517 BEMISS ROAD	
City-St-Zip:	VALDOSTA, GA 31603	
Title:	ST	( ) Delete
Name:	MUEGEL, PHILIP E	
Address:	1000 HURRICANE SHOALS RD, C-100	
City-St-Zip:	LAWRENCEVILLE, GA 30043	
Title:	D	( ) Delete
Name:	LARKIN, MIKE	
Address:	1000 HURRICANE SHOALS RD C-100	
City-St-Zip:	LAWRENCEVILLE, GA 30043	
Title:	D	( ) Delete
Name:	SALSMAN, MONTE	
Address:	3110 KETTERING BLVD	
City-St-Zip:	DAYTON, OH 45439	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ANITA L. LEFTY, AGENT AGT 04/10/2009

Electronic Signature of Signing Officer or Director — Date