

2025 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F24000002796

Entity Name: INTERNATIONAL PACKAGED ICE ASSOCIATION, INC.**Current Principal Place of Business:**1519 NORTH DALE MABRY HIGHWAY, STE. 202
LUTZ, FL 33548-3033**Current Mailing Address:**1519 NORTH DALE MABRY HIGHWAY, STE. 202
LUTZ, FL 33548-3033 US**FEI Number: 53-0114637****Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**JONATHAN C. KOCH, ESQ.
1304 SOUTH MILLER ROAD
VALRICO, FL 33594 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 D
Name WARD, STEVE
Address 1440 CALDWELL AVE.
City-State-Zip: MODESTO CA 95350Title DS
Name LOMANGINO, FRED
Address 4045 ROUTE 33
City-State-Zip: TINTON FALLS NJ 07753Title D
Name WASHNOCK, BRIAN
Address 5710 LBJ FREEWAY STE. 300
City-State-Zip: DALLAS TX 75240Title DPC
Name SNYDER, JARROD
Address 281 KINGS MILL ROAD
City-State-Zip: YORK PA 17401Title D
Name JEROW, JAKE
Address 5709 HARRISON AVENUE
City-State-Zip: CINCINNATI OH 45248Title D
Name DESJARDINS, KEVIN
Address 401 NW ADLER ST
City-State-Zip: MADRAS OR 97741

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: FRED LOMANGINO**CHAIRMAN****03/07/2025**_____
Electronic Signature of Signing Officer/Director Detail_____
Date