

2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 847101

Entity Name: FT. WALTON BEACH WINSUPPLY CO.**Current Principal Place of Business:**40 BEAL PKWY NW
FORT WALTON BEACH, FL 32548-4825**Current Mailing Address:**C/O WGS - COMPLIANCE SERVICES
3110 KETTERING BLVD
MORaine, OH 45439 US**FEI Number:** 43-1143041**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYES STREET
TALLAHASSEE, FL 32301 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 O'QUINN, JASON N
Address 40 BEAL PKWY NW
City-State-Zip: FORT WALTON BEACH FL 32548-4825

Title SECRETARY
Name KIRKLAND, MICHAEL S.
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

Title ASST. SECRETARY
Name MAY, GARY L.
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
Name LYNN, JONATHAN D.
Address 25451A STATE HIGHWAY 181
City-State-Zip: DAPHNE AL 36526-6017

Title DIRECTOR
Name RICHARDSON, CHRISTOPHER L.
Address 401 E 24TH ST
City-State-Zip: LYNN HAVEN FL 32444-4882

Title DIRECTOR
Name ATWELL, MICHAEL D.
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****04/12/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WANIAK, ROBERT A.
Address 177 CASH ST
City-State-Zip: SOUTH PORTLAND ME 04106-6205

Title DIRECTOR
Name LYON, STEVEN E.
Address 3110 KETTERING BLVD
City-State-Zip: MORaine OH 45439-1924