## **2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F98000003850

Entity Name: WINSUPPLY INC.

**Current Principal Place of Business:** 

C/O WGS - COMPLIANCE SERVICES

3110 KETTERING BLVD MORAINE, OH 45439

**Current Mailing Address:** 

C/O WGS - COMPLIANCE SERVICES 3110 KETTERING BLVD MORAINE, OH 45439 US

FEI Number: 31-1356478 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:

City-State-Zip:

City-State-Zip:

Electronic Signature of Registered Agent

Date

**FILED** Apr 20, 2023

Secretary of State

7276088438CC

Officer/Director Detail:

Title DIRECTOR, TREASURER Title DIRECTOR

DITOMMASO, ROBERT P. Name Name MACLEOD, THOMAS D.

Address C/O WGS - COMPLIANCE SERVICES Address C/O WGS - COMPLIANCE SERVICES

3110 KETTERING BLVD 3110 KETTERING BLVD

MORAINE OH 45439 MORAINE OH 45439 City-State-Zip:

Title **SECRETARY** Title DIRECTOR

MAY, GARY L. KRESS, BRADY W. Name Name

C/O WGS - COMPLIANCE SERVICES C/O WGS - COMPLIANCE SERVICES Address Address

3110 KETTERING BLVD 3110 KETTERING BLVD

MORAINE OH 45439 MORAINE OH 45439 City-State-Zip: City-State-Zip:

Title **TREASURER** Title **DIRECTOR** 

Name CULLER, SEAN Name JOHNSTON, MICHAEL S.

3110 KETTERING BLVD C/O WGS - COMPLIANCE SERVICES Address Address

3110 KETTERING BLVD

MORAINE OH 45439 City-State-Zip: City-State-Zip: MORAINE OH 45439

Title **DIRECTOR** 

Title DIRECTOR, PRESIDENT Name SCHWARTZ, RICHARD W.

Name DICE, JEFFREY M. C/O WGS - COMPLIANCE SERVICES Address

C/O WGS - COMPLIANCE SERVICES Address 3110 KETTERING BLVD 3110 KETTERING BLVD

MORAINE OH 45439 MORAINE OH 45439

City-State-Zip:

## Continues on page 2

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.

04/20/2023 SIGNATURE: SEAN W. CULLER TREASURER

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name RUMFOLA, ANNLEA C. Name FERGUSON, ROBERT W.

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3110 KETTERING BLVD 3110 KETTERING BLVD

City-State-Zip: MORAINE OH 45439 City-State-Zip: MORAINE OH 45439

Title DIRECTOR Title DIRECTOR

Name SCHMIDT, JENNIFER L. Name GIACOMIN, JON L.

Address C/O WGS - COMPLIANCE SERVICES Address C/O WGS - COMPLIANCE SERVICES

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