2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003850

Entity Name: WINSUPPLY INC.

Current Principal Place of Business:

C/O 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:

Electronic Signature of Registered Agent

Date

FILED Apr 26, 2016

Secretary of State

CC0129490894

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR

Name JOHNSTON, JACK W Name BALBACH, KARL K

Address C/O COMPLIANCE SERVICES 3110 Address C/O COMPLIANCE SERVICES 3110

KETTERING BLVD KETTERING BLVD

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

Title SECRETARY Title ASST SECRETARY

Name KIRKLAND, MICHAEL S. Name METZGER, DAVID E

Address C/O COMPLIANCE SERVICES 3110 Address C/O COMPLIANCE SERVICES 3110

KETTERING BLVD KETTERING BLVD

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

Title TREASURER Title DIRECTOR

Name KREMER, PHILIP M Name KEMP, THOMAS W

Address C/O COMPLIANCE SERVICES 3110 Address C/O COMPLIANCE SERVICES 3110

KETTERING BLVD KETTERING BLVD

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

Title DIRECTOR Title DIRECTOR

Name BREYFOGLE, ROY H Name KEMP, THOMAS W
Address C/O COMPLIANCE SERVICES 3110 Address 3110 KETTERING BLVD

KETTERING BLVD

City-State-Zip: MORAINE OH 45439

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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: PHILIP M. KREMER TREASURER 04/26/2016

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

DIRECTOR Title Title DIRECTOR

Name MACLEOD, THOMAS D Name SALSMAN, MONTE L

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

KETTERING BLVD

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

DIRECTOR Title DIRECTOR Title

SCHWARTZ, RICHARD W Name MCCLELLAND, MICHAEL J Name

> C/O COMPLIANCE SERVICES 3110 KETTERING Address C/O COMPLIANCE SERVICES 3110 BLVD

KETTERING BLVD

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

DIRECTOR Title

Address

RUMFOLA, ANNLEA C Name

Address C/O COMPLIANCE SERVICES 3110 KETTERING

BLVD

City-State-Zip: MORAINE OH 45439