2018 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:

Electronic Signature of Registered Agent

Date

FILED Jan 25, 2018

Secretary of State

CC5455028236

Officer/Director Detail:

KETTERING BLVD

 Title
 DIRECTOR
 Title
 ASST SECRETARY

 Name
 JOHNSTON, JACK W
 Name
 METZGER, DAVID E

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

KETTERING BLVD

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

Title TREASURER Title DIRECTOR

Name KREMER, PHILIP M Name BREYFOGLE, ROY H

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 MACLEOD, THOMAS D Name SALSMAN, MONTE L

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 SCHWARTZ, RICHARD W Name MCCLELLAND, MICHAEL J

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

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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 01/25/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title **DIRECTOR** Title **SECRETARY**

Name RUMFOLA, ANNLEA C Name ANDERSON, BRUCE E.

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

3110 KETTERING BLVD

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

Title **PRESIDENT** Title DIRECTOR

Name GORDON, ROLAND L. Name KRESS, BRADY W.

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

3110 KETTERING BLVD

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