

**2024 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11836

**Entity Name:** WINSUPPLY JACKSONVILLE FL CO.**Current Principal Place of Business:**3110 KETTERING BLVD  
C/O WGS - COMPLIANCE SERVICES  
MORaine, OH 45439**Current Mailing Address:**C/O WGS - COMPLIANCE SERVICES  
3110 KETTERING BLVD  
MORaine, OH 45439 US**FEI Number:** 59-2705537**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS 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 DIRECTOR  
Name FERGUSON, ROBERT W.  
Address 3110 KETTERING BLVD  
City-State-Zip: MORaine OH 45439

Title TREASURER  
Name CULLER, SEAN W  
Address 3110 KETTERING BLVD  
City-State-Zip: MORaine OH 45439

Title SECRETARY  
Name KIRKLAND, MICHAEL S.  
Address 3110 KETTERING BLVD  
City-State-Zip: MORaine OH 45439

Title DIRECTOR  
Name LARKIN, LUCAS M.  
Address 297 FAIRBURN INDUSTRIAL RD  
City-State-Zip: FAIRBURN GA 30213-1642

Title DIRECTOR, PRESIDENT  
Name FENNEL, JUSTIN L.  
Address 2365 DENNIS ST  
City-State-Zip: JACKSONVILLE FL 32204

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

Title DIRECTOR  
Name ATWELL, MICHAEL D.  
Address 3110 KETTERING BLVD  
City-State-Zip: MORaine OH 45439

Title DIRECTOR  
Name JOHNSON, DON E.  
Address 2121 SW 19TH AVENUE RD  
City-State-Zip: OCALA FL 34471-0504

**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.*

**SIGNATURE: SEAN W. CULLER****TREASURER****03/26/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title	DIRECTOR
Name	BURKE, MARK A.
Address	4822 LENA RD
City-State-Zip:	BRADENTON FL 34211