

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# H05603

**Entity Name:** GMS SOUTHEAST, INC.**Current Principal Place of Business:**3904 EAST ADAMO DRIVE  
TAMPA, FL 33605**Current Mailing Address:**3904 EAST ADAMO DRIVE  
TAMPA, FL 33605 US**FEI Number:** 59-2410846**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, PRESIDENT  
Name TURNER, JOHN C. JR.  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

Title SECRETARY  
Name APOLINSKY, CRAIG D.  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

Title ASST. SECRETARY  
Name SCULLY, KATHRYN E  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

Title ASST. TREASURER  
Name JANKE, ROBERT M.  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

Title DIRECTOR, TREASURER  
Name DEAKIN, SCOTT M.  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

Title VP  
Name HESTER, MATTHEW  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

Title ASST. SECRETARY  
Name MCKENNA, ANDREW  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

Title ASST. SECRETARY  
Name O'BRIEN, BRANDON  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

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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:** KATHRYN E. SCULLY**ASSISTANT SECRETARY** 04/22/2024

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title ASST. TREASURER  
Name BELL, WILLIAM FORREST  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

Title ASST. SECRETARY  
Name OETINGER, JESSICA  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

Title DIRECTOR, COO  
Name HENDREN, GEORGE T.  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084

Title ASST. SECRETARY  
Name DEXTER, MICHAEL  
Address 100 CRESCENT CENTRE PARKWAY  
SUITE 800  
City-State-Zip: TUCKER GA 30084