

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000005310

Entity Name: IPS STRUCTURAL ADHESIVES, INC.**Current Principal Place of Business:**600 ELLIS ROAD
DURHAM, NC 27703**Current Mailing Address:**455 W. VICTORIA ST
COMPTON, CA 90220**FEI Number:** 20-5165553**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PARACORP INCORPORATED
155 OFFICE PLAZA DRIVE
1ST FLOOR
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:** SHARON COOKE

05/01/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, ASST. TREASURER
Name REEVES, JOHN
Address 600 ELLIS ROAD
City-State-Zip: DURHAM NC 27703

Title CFO, TREASURER, SECRETARY
Name BARTON, WILLIAM D.
Address 455 W. VICTORIA STREET
City-State-Zip: COMPTON GA 90220

Title CEO, CHAIRMAN
Name BILBROUGH, THOMAS T.
Address 455 W. VICTORIA ST
City-State-Zip: COMPTON CA 90220

Title ASST. SECRETARY
Name DE LEON, ADORA
Address 455 W. VICTORIA ST
City-State-Zip: COMPTON CA 90220

Title DIRECTOR
Name BUONANNO, BERNARD
Address 455 W. VICTORIA ST
City-State-Zip: COMPTON CA 90220

Title DIRECTOR
Name HILL, DOUGLAS
Address 455 W. VICTORIA ST
City-State-Zip: COMPTON CA 90220

Title DIRECTOR
Name PIERCE, CHRISTOPHER
Address 455 W. VICTORIA ST
City-State-Zip: COMPTON CA 90220

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: ADORA DE LEON

ASST SECRETARY

05/01/2017

Electronic Signature of Signing Officer/Director Detail

Date