

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000000486

**FILED**  
**Apr 22, 2021**  
**Secretary of State**  
**5973742395CC**

**Entity Name:** GUARDIAN AGRICULTURAL PLASTICS CORP.

**Current Principal Place of Business:**

8600 W. BRYN MAWR  
SUITE 800N  
CHICAGO, IL 60631

**Current Mailing Address:**

8600 W. BRYN MAWR  
SUITE 800N  
CHICAGO, IL 60631 US

**FEI Number:** 75-3228588

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	Title	DIRECTOR
Name	LASLEY, JEFFREY	Name	JENSEN, BRUCE
Address	8600 W. BRYN MAWR SUITE 800N	Address	8600 W. BRYN MAWR SUITE 800N
City-State-Zip:	CHICAGO IL 60631	City-State-Zip:	CHICAGO IL 60631
Title	ASSISTANT SECRETARY	Title	CONTROLLER
Name	BROWNING, JULIE	Name	COTE, ISABELLE
Address	8600 W. BRYN MAWR SUITE 800N	Address	8600 W. BRYN MAWR SUITE 800N
City-State-Zip:	CHICAGO IL 60631	City-State-Zip:	CHICAGO IL 60631
Title	VP	Title	VP
Name	BENDAVID, SALOMON	Name	LASLEY, JEFFREY
Address	8600 W. BRYN MAWR SUITE 800N	Address	8600 W. BRYN MAWR SUITE 800N
City-State-Zip:	CHICAGO IL 60631	City-State-Zip:	CHICAGO IL 60631
Title	VP	Title	CFO
Name	JENSEN, BRUCE	Name	LECAVALIER, DONALD
Address	8600 W. BRYN MAWR SUITE 800N	Address	8600 W. BRYN MAWR SUITE 800N
City-State-Zip:	CHICAGO IL 60631	City-State-Zip:	CHICAGO IL 60631

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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:** JULIE BROWNING

**ASSISTANT SECRETARY** 04/22/2021

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title SECRETARY  
Name DESAULNIERS, CHRISTINE  
Address 8600 W. BRYN MAWR  
SUITE 800N  
City-State-Zip: CHICAGO IL 60631

Title VP  
Name MORISSET, ERIC  
Address 8600 W. BRYN MAWR  
SUITE 800N  
City-State-Zip: CHICAGO IL 60631

Title DIRECTOR  
Name MORIN, THOMAS GASTON LOUIS  
Address 8600 W. BRYN MAWR  
SUITE 800N  
City-State-Zip: CHICAGO IL 60631

Title ASSISTANT SECRETARY (TAX)  
Name DUBE, YVON  
Address 8600 W. BRYN MAWR  
SUITE 800N  
City-State-Zip: CHICAGO IL 60631

Title VP  
Name COTE, ISABELLE  
Address 8600 W. BRYN MAWR  
SUITE 800N  
City-State-Zip: CHICAGO IL 60631

Title CHIEF LEGAL OFFICER  
Name DESAULNIERS, CHRISTINE  
Address 8600 W. BRYN MAWR  
SUITE 800N  
City-State-Zip: CHICAGO IL 60631

Title PRESIDENT  
Name MORIN, THOMAS GASTON LOUIS  
Address 8600 W. BRYN MAWR  
SUITE 800N  
City-State-Zip: CHICAGO IL 60631

Title ASSISTANT SECRETARY (TAX)  
Name GERTILUS, CLERVEDA  
Address 8600 W. BRYN MAWR  
SUITE 800N  
City-State-Zip: CHICAGO IL 60631

Title TREASURER  
Name HEBERT, MATHIEU  
Address 8600 W. BRYN MAWR  
SUITE 800N  
City-State-Zip: CHICAGO IL 60631