

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F07000001492

**Entity Name:** INTERTAPE POLYMER CORP.**Current Principal Place of Business:**100 PARAMOUNT DRIVE  
SUITE 300  
SARASOTA, FL 34232**Current Mailing Address:**100 PARAMOUNT DRIVE  
SUITE 300  
SARASOTA, FL 34232 US**FEI Number:** 57-1088158**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      TREASURER, DIRECTOR, VP,  
FINANCE  
Name      CRYSTAL, JEFFREY  
Address    100 PARAMOUNT DRIVE  
SUITE 300  
City-State-Zip:    SARASOTA FL 34232

Title      VICE-PRESIDENT, SALES, DIRECTOR  
Name      NELSON, SHAWN  
Address    100 PARAMOUNT DRIVE  
SUITE 300  
City-State-Zip:    SARASOTA FL 34232

Title      VICE-PRESIDENT, SUPPLY CHAIN  
AND GLOBAL SOURCING  
Name      TOCCI, JOSEPH  
Address    100 PARAMOUNT DRIVE  
SUITE 300  
City-State-Zip:    SARASOTA FL 34232

Title      VICE-PRESIDENT, TAX  
Name      O'STEEN, KEVIN  
Address    100 PARAMOUNT DRIVE  
SUITE 300  
City-State-Zip:    SARASOTA FL 34232

Title      VP, SECRETARY  
Name      BOOTH, RANDI M.  
Address    100 PARAMOUNT DRIVE  
SUITE 300  
City-State-Zip:    SARASOTA FL 34232

Title      VICE-PRESIDENT, HUMAN  
RESOURCES  
Name      THOMPSON, MARY-BETH  
Address    100 PARAMOUNT DRIVE  
SUITE 300  
City-State-Zip:    SARASOTA FL 34232

Title      DIRECTOR, PRESIDENT  
Name      YULL, GREGORY A.  
Address    100 PARAMOUNT DRIVE  
SUITE 300  
City-State-Zip:    SARASOTA FL 34232

*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:** O'STEEN , KEVIN

VICE-PRESIDENT

03/23/2022

Electronic Signature of Signing Officer/Director Detail

Date