

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F14000003354

**Entity Name:** A. SCHULMAN, INC.**Current Principal Place of Business:**3637 RIDGEWOOD ROAD  
FAIRLAWN, OH 44333**Current Mailing Address:**3637 RIDGEWOOD ROAD  
FAIRLAWN, OH 44333 US**FEI Number:** 34-0514850**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            PRESIDENT, DIRECTOR  
Name            RZEPKA, BERNARD  
Address        3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title            SECRETARY  
Name            MINC, DAVID C  
Address        3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title            CFO  
Name            LEVANDUSKI, JOSEPH J  
Address        3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title            CHAIRMAN OF THE BOD  
Name            GINGO, JOSEPH M.  
Address        3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title            DIRECTOR  
Name            ALLSPACH, EUGENE R  
Address        3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title            DIRECTOR  
Name            BARMORE, GREGORY T  
Address        3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title            DIRECTOR  
Name            BIRNEY, DAVID G  
Address        3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title            DIRECTOR  
Name            MCMANUS, MICHAEL A  
Address        3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

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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:** DAVID C MINC**SECRETARY****04/06/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name MCMILLAN, DONALD B  
Address 3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title DIRECTOR  
Name MILLER, GARY A.  
Address 3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title DIRECTOR  
Name MITAROTONDA, JAMES A  
Address 3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title DIRECTOR  
Name REID, IRVIN D  
Address 3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title DIRECTOR  
Name MEYER, LEE D  
Address 3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title DIRECTOR  
Name MISHIC, PATRICIA  
Address 3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333

Title DIRECTOR  
Name NOVAK, ERNEST J JR.  
Address 3637 RIDGEWOOD ROAD  
City-State-Zip: FAIRLAWN OH 44333