

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F19000001735

**Entity Name:** ANTARES MIDCO INC.**Current Principal Place of Business:**500 WEST MONROE STREET  
SUITE 1700  
CHICAGO, IL 60661**Current Mailing Address:**500 WEST MONROE STREET  
SUITE 1700  
CHICAGO, IL 60661 US**FEI Number:** 47-4644629**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  
Name FURLONG, MARK  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661

Title CHAIRMAN OF THE BOARD  
Name HIGGINS, MELINA  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661

Title TREASURER/CFO  
Name GIARRAPUTO, BARRY J.  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661

Title VP  
Name LINDBLAD, TYLER W.  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR  
Name BRACKETT, DAVID M.  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661

Title SECRETARY  
Name FRANK, BRUCE  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661

Title PRESIDENT/CEO  
Name BRACKETT, DAVID M.  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR  
Name RUBIN, GEOFFREY  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661

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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:** TYLER W. LINDBLAD

VICE PRESIDENT

04/23/2021

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name COLLA, DAVID  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR  
Name NORDIN, DIANE  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR  
Name GRAHAM, JOHN  
Address 500 WEST MONROE STREET  
SUITE 1700  
City-State-Zip: CHICAGO IL 60661