

2023 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 LYNE, TIMOTHY G.
Address 500 WEST MONROE STREET
SUITE 1700
City-State-Zip: CHICAGO IL 60661

Title PRESIDENT/CEO
Name LYNE, TIMOTHY G.
Address 500 WEST MONROE STREET
SUITE 1700
City-State-Zip: CHICAGO IL 60661

Title TREASURER
Name VANPELT, JAMES
Address 500 WEST MONROE STREET
SUITE 1700
City-State-Zip: CHICAGO IL 60661

Title VP
Name BARRY, DANIEL
Address 500 WEST MONROE STREET
SUITE 1700
City-State-Zip: CHICAGO IL 60661

Title DIRECTOR
Name SHEN, KELLY
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

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

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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: LINDBLAD , TYLER W.

VP

03/01/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FURLONG, MARK
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 DIRECTOR
Name HIGGINS, MELINA
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