

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P30062

FILED
Apr 06, 2020
Secretary of State
0737203683CC

Entity Name: SAINT-GOBAIN PERFORMANCE PLASTICS CORPORATION

Current Principal Place of Business:

31500 SOLON ROAD
SOLON, OH 44139

Current Mailing Address:

20 MOORES ROAD
MALVERN, PA 19355 US

FEI Number: 95-1947155

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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 VP
Name PANARO, ROBERT
Address 20 MOORES ROAD
City-State-Zip: MALVERN PA 19355

Title VP
Name MESSMER, STEVEN
Address 20 MOORES ROAD
City-State-Zip: MALVERN PA 19355

Title VP, TREASURER
Name SWEENEY, III, JOHN J
Address 20 MOORES ROAD
City-State-Zip: MALVERN PA 19355

Title VP, SECRETARY
Name CAROL, GRAY
Address 20 MOORES ROAD
City-State-Zip: MALVERN PA 19355

Title DIRECTOR
Name GUILLOT, LAURENT
Address 31500 SOLON ROAD
City-State-Zip: SOLON OH 44139

Title VP
Name AERTS, MARC
Address 31500 SOLON ROAD
City-State-Zip: SOLON OH 44139

Title VP
Name ANGUS, JEAN
Address 31500 SOLON ROAD
City-State-Zip: SOLON OH 44139

Title VP
Name APELIAN, MINAS
Address 20 MOORES ROAD
City-State-Zip: MALVERN PA 19355

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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: STEVEN MESSMER

VICE PRESIDENT

04/06/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name DESPRES, DELPHINE
Address 31500 SOLON ROAD
City-State-Zip: SOLON OH 44139