

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 818114

Entity Name: SONOCO PRODUCTS COMPANY**Current Principal Place of Business:**ONE NORTH SECOND STREET
HARTSVILLE, SC 29550**Current Mailing Address:**ONE NORTH SECOND STREET
MS:B04
HARTSVILLE, SC 29550**FEI Number:** 57-0248420**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED AGENT GROUP INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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
Name COKER, R. HOWARD L
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title ASST. TREASURER
Name YOUNGBLOOD, W. PATRICK
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title CFO
Name ALBRECHT, JULIE C.
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title VP
Name HARRELL, JAMES A
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title ASST. SECRETARY
Name KREMER, ELIZABETH R
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title SECRETARY
Name FLORENCE, JOHN M JR.
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title VP
Name FULLER, RODGER D
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title VP
Name WOOD, ADAM
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Continues on page 2

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: W. PATRICK YOUNGBLOOD**ASSISTANT TREASURER 04/12/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name THOMPSON, MARCY J
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title VP
Name DILLARD, ROB
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title TREASURER
Name CUMMINGS, HAROLD G III
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title VP
Name SCHRUM, ROGER P
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title VP
Name TOMASZEWSKI, JEFF
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550

Title CONTROLLER
Name KIRKLAND, JAMES W
Address ONE NORTH SECOND STREET
City-State-Zip: HARTSVILLE SC 29550