

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 843408

Entity Name: CPFILMS INC.

Current Principal Place of Business:

575 MARYVILLE CENTRE DRIVE
ST. LOUIS, MO 63141

Current Mailing Address:

200 SOUTH WILCOX DRIVE
KINGSPORT, TN 37660 US

FEI Number: 06-0385340

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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 GOLDEN, DAVID A
Address 200 S. WILCOX DRIVE
City-State-Zip: KINGSPORT TN 37660

Title PRESIDENT
Name SMITH, TRAVIS
Address 575 MARYVILLE CENTRE DRIVE
City-State-Zip: SAINT LOUIS MO 63141

Title ASST. TREASURER
Name WATTS, MICHAEL M.
Address 200 SOUTH WILCOX DRIVE
City-State-Zip: KINGSPORT TN 37660

Title VP
Name BRAY, CHRISTOPHER J
Address 200 S. WILCOX DRIVE
City-State-Zip: KINGSPORT TN 37660

Title VP, SECRETARY
Name WOODMANSEE, DAVID A
Address 200 S WILCOX DRIVE
City-State-Zip: KINGSPORT TN 37660

Title VP, TAX
Name CAVINESS, JOHN
Address 200 S WILCOX DRIVE
City-State-Zip: KINGSPORT TN 37660

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: JOHN CAVINESS

VP, TAX

01/06/2017

Electronic Signature of Signing Officer/Director Detail

Date