

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F13000005345

Entity Name: ATKORE PLASTIC PIPE CORPORATION**Current Principal Place of Business:**16100 S. LATHROP AVE.
HARVEY, IL 60426**Current Mailing Address:**16100 S. LATHROP AVE.
HARVEY, IL 60426 US**FEI Number:** 46-3278628**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 VICE PRESIDENT / TREASURER /
ASST. SECRETARY
Name DEITZER, JOHN
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title VP
Name LOWE, ANGEL
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title VP
Name JOHNSON, DAVID P.
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title ASSISTANT SECRETARY
Name YOUNG, COURTNEY
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title VP
Name KLINE, MATTHEW
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title VP
Name SHERMAN, JEFF
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title DIRECTOR
Name JOHNSON, DAVID P.
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title SECRETARY
Name KELLY, DANIEL S
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

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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: DANIEL S KELLY**VICE PRESIDENT****04/24/2021**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title VP
Name KELLY, DANIEL S
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title PRESIDENT
Name PREGENZER, JOHN
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title VP
Name SULLIVAN, GREER
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title DIRECTOR
Name WALTZ, WILLIAM
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426

Title VP
Name PURTLE, GREG
Address 16100 S. LATHROP AVE.
City-State-Zip: HARVEY IL 60426