

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 842774

FILED
Jan 04, 2010
Secretary of State

Entity Name: TENNECO AUTOMOTIVE OPERATING COMPANY INC.

Current Principal Place of Business:

500 NORTH FIELD DR
LAKE FOREST, IL 60045 US

New Principal Place of Business:

Current Mailing Address:

500 NORTH FIELD DR
ATTN CORP TAX DEPT
LAKE FOREST, IL 60045 US

New Mailing Address:

FEI Number: 74-1933558 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P
Name: SHERRILL, GREGG
Address: 500 N. FIELD DR
City-St-Zip: LAKE FOREST, IL 60045

Title: VPCF
Name: TRAMMELL, KENNETH R
Address: 500 N. FIELD DR
City-St-Zip: LAKE FOREST, IL 60045

Title: VPS
Name: HARRINGTON, JAMES
Address: 500 N. FIELD DR
City-St-Zip: LAKE FOREST, IL 60045

Title: VPT
Name: KUNZ, JOHN E
Address: 500 N. FIELD DR
City-St-Zip: LAKE FOREST, IL 60045

Title: VPC
Name: NOVAS, PAUL
Address: 500 N. FIELD DR
City-St-Zip: LAKE FOREST, IL 60045

Title: AS
Name: FITZENBERGER, JOHN
Address: 500 N. FIELD DR
City-St-Zip: LAKE FOREST, IL 60045

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 FITZENBERGER

AS

01/04/2010

_____ Electronic Signature of Signing Officer or Director

_____ Date