

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000002966

FILED
Apr 29, 2008
Secretary of State

Entity Name: MOMENTIVE PERFORMANCE MATERIALS QUARTZ, INC.

Current Principal Place of Business:

22557 WEST LUNN ROAD
STRONGSVILLE, OH 44136

New Principal Place of Business:

Current Mailing Address:

1 PLASTICS AVENUE
PITTSFIELD, MA 01201 US

New Mailing Address:

FEI Number: 34-1839929 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SO PINE ISLAND RD
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: DP () Delete
Name: KOLBERG, RAYMOND
Address: 22557 WEST LUNN ROAD
City-St-Zip: STRONGSVILLE, OH 44149

Title: DT () Delete
Name: REYES, JOSEPH
Address: 22557 WEST LUNN ROAD
City-St-Zip: STRONGSVILLE, OH 44149

Title: DS () Delete
Name: JOHNS, DOUGLAS
Address: 187 DANBURY ROAD
City-St-Zip: WILTON, CT 06897

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DCFO (X) Change () Addition
Name: REYES, JOSEPH
Address: 22557 WEST LUNN ROAD
City-St-Zip: STRONGSVILLE, OH 44149

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T () Change (X) Addition
Name: RUSTOWICZ, GREGORY
Address: 260 HUDSON RIVER ROAD
City-St-Zip: WATERFORD, NY 12188

Title: AT () Change (X) Addition
Name: BUFFALINE, RICKY
Address: 260 HUDSON RIVER ROAD
City-St-Zip: WATERFORD, NY 12188

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: GLENN GRILLON

Electronic Signature of Signing Officer or Director

AIF

04/29/2008

_____ Date