

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003565

FILED
Apr 12, 2012
Secretary of State

Entity Name: A.P. GREEN REFRACTORIES, INC.

Current Principal Place of Business:

400 FAIRWAY DR
MOON TOWNSHIP, PA 151083190

New Principal Place of Business:

Current Mailing Address:

400 FAIRWAY DR
ATTN: TAX DEPT.
MOON TOWNSHIP, PA 151083190

New Mailing Address:

400 FAIRWAY DR
ATTN: TAX DEPT.
MOON TOWNSHIP, PA 151083190

FEI Number: 43-1680037

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH 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

OFFICERS AND DIRECTORS:

Title: PSDD
Name: ALLEGRETTI, JON A
Address: 400 FAIRWAY DR
City-St-Zip: MOON TOWNSHIP, PA 15108

Title: CEO
Name: KARHUT, GUENTER
Address: 400 FAIRWAY DR
City-St-Zip: MOON TOWNSHIP, PA 15108

Title: CFOT
Name: FAIMANN, GABRIEL
Address: 400 FAIRWAY DR
City-St-Zip: MOON TOWNSHIP, PA 15108

Title: ASC
Name: SCHALK, MICHAEL A
Address: 400 FAIRWAY DR
City-St-Zip: MOON TOWNSHIP, PA 15108

Title: D
Name: KARHUT, GUENTER
Address: 400 FAIRWAY DR
City-St-Zip: MOON TOWNSHIP, PA 15108

Title: D
Name: FAIMANN, GABRIEL
Address: 400 FAIRWAY DR
City-St-Zip: MOON TOWNSHIP, PA 15108

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: GABRIEL FAIMANN

CFO

04/12/2012

Electronic Signature of Signing Officer or Director

Date