

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000000709

FILED  
Feb 22, 2011  
Secretary of State

Entity Name: OUTOTEC (USA) INC.

**Current Principal Place of Business:**

6100 PHILIPS HWY  
JACKSONVILLE, FL 32216 US

**New Principal Place of Business:**

**Current Mailing Address:**

6100 PHILIPS HWY  
JACKSONVILLE, FL 32216 US

**New Mailing Address:**

FEI Number: 52-1659765      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ELDER, JOHN M  
6100 PHILIPS HWY  
JACKSONVILLE, FL 32216 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: C  
Name: WEIDNER, REINER  
Address: 6100 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

Title: D  
Name: ELDER, JOHN  
Address: 6100 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

Title: VST  
Name: SIDDALL, DAVID  
Address: 6100 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

Title: VAS  
Name: FANG, STEPHANIE  
Address: 6100 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

Title: P  
Name: SCHRADEN, KEVIN  
Address: 6100 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

Title: V  
Name: MAYHEW, IAN  
Address: 6100 PHILIPS HWY  
City-St-Zip: JACKSONVILLE, FL 32216

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: DAVID SIDDALL

VST

02/22/2011

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date