

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 843777

FILED
Jan 04, 2010
Secretary of State

Entity Name: ANDRITZ INC.

Current Principal Place of Business:

1115 NORTHMEADOW PKWY.
ROSWELL, GA 30076

New Principal Place of Business:

Current Mailing Address:

1115 NORTHMEADOW PKWY.
ROSWELL, GA 30076

New Mailing Address:

FEI Number: 14-1438713

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: D
Name: HORNHOFFER, KARL
Address: STATTEGGER STRASSE 18
City-St-Zip: GRAZ, AU A8045 AU

Title: D
Name: HUMBERT, KOEFLER
Address: EIBESBRUNNERGASSE 20
City-St-Zip: VIENNA, AU A1121 AU

Title: VP
Name: WARD, ROBERT O
Address: 1115 NORTHMEADOW PARKWAY
City-St-Zip: ROSWELL, GA 30076 US

Title: AS
Name: ZINK, DEBORAH B
Address: 1115 NORTHMEADOW PKWY.
City-St-Zip: ROSWELL, GA 30076 US

Title: DP
Name: TIMOTHY, RYAN J
Address: 1115 NORTHMEADOW PKWY.
City-St-Zip: ROSWELL, GA 30076 US

Title: D
Name: LEITNER, WOLFGANG
Address: STATTEGGER STRASSE 18
City-St-Zip: GRAZ, AU A8045 AU

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: DEBORAH B. ZINK

AS

01/04/2010

Electronic Signature of Signing Officer or Director

Date