#### 2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M0400003584

Entity Name: COOPER CROUSE-HINDS, LLC

#### **Current Principal Place of Business:**

WOLF & 7TH N. STREETS SYRACUSE, NY 13221-4999

## **Current Mailing Address:**

600 TRAVIS SUITE 5400 HOUSTON, TX 77002 US

# FEI Number: 20-1288146

## Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US Apr 21, 2014 Secretary of State CC0158748541

FILED

Certificate of Status Desired: No

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

## Authorized Person(s) Detail :

Title	MGR	Title	PRES	
Name	EATON US HOLDINGS, INC.	Name	VANLANDINGHAM, WILLIAM	
Address	600 TRAVIS, SUITE 5400	Address	1000 EATON BLVD.	
City-State-Zip:	HOUSTON TX 77002	City-State-Zip:	CLEVELAND OH 44122	
Title	VP, GENERAL COUNSEL	Title	VP, TREASURER	
Name	MCGUIRE, MARK M	Name	MEYERHOEFER, TRENT M	
Address	1000 EATON BOULEVARD	Address	1000 EATON BOULEVARD	
City-State-Zip:	CLEVELAND OH 44122	City-State-Zip:	CLEVELAND OH 44122	
Title	VP, SECRETARY	Title	VP, CFO	
Name	WRIGHT, LIZBETH L	Name	FEARON, RICHARD H	
Address	1000 EATON BOULEVARD	Address	1000 EATON BOULEVARD	
City-State-Zip:	CLEVELAND OH 44122	City-State-Zip:	CLEVELAND OH 44122	
<b>T</b> :0 -		Title	VP, CONTROLLER	
Title	VP		,	
Name	PAGE, ROBERT F	Name	SEMELSBERGER, KEN D	
Address	WOLF & 7TH NORTH STREETS	Address	1000 EATON BLVD.	
City-State-Zip:	SYRACUSE NY 13221-4999	City-State-Zip:	CLEVELAND OH 44122	
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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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURA A. BIGLER

VP, ASST. SECRETARY 04/21/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date

Date

# Authorized Person(s) Detail Continued :

Title	VP, ASST. SECRETARY		
Name	BIGLER, LAURA A		
Address	1000 EATON BLVD.		
City-State-Zip:	CLEVELAND OH 44122		