### 2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M08000001267

Entity Name: COOPER POWER SYSTEMS, LLC

#### Current Principal Place of Business:

2300 BADGER DRIVE WAUKESHA, WI 53188-5931

### **Current Mailing Address:**

600 TRAVIS STREET SUITE 5400 HOUSTON, TX 77002 US

## FEI Number: 76-0253330

### Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US FILED Apr 21, 2014 Secretary of State CC9681673219

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 :

	/ (attro: 120 a 1			
	Title	MGRM	Title	PRES
	Name		Name	STINSON, RICHARD A
	Address	INTERNATIONAL, LLC 600 TRAVIS, SUITE 5600	Address	1000 EATON BLVD.
	City-State-Zip:	HOUSTON TX 77002	City-State-Zip:	CLEVELAND OH 44122
	ony onate zip.		Title	VP
	Title	VP, GENERAL COUNSEL	Name	MCGUIRE, MARK M
	Name	MCGUIRE, MARK M	Address	1000 EATON BOULEVARD
	Address	1000 EATON BLVD.	City-State-Zip:	CLEVELAND OH 44122
	City-State-Zip:	CLEVELAND OH 44122		
	Title	VP. TREASURER	Title	VP
	Name	MEYERHOEFER, TRENT M	Name	SEMELSBERGER, KEN D
	Address	1000 EATON BOULEVARD	Address City-State-Zip:	1000 EATON BOULEVARD CLEVELAND OH 44122
	City-State-Zip:	CLEVELAND OH 44122		
		OLEVELAND OIT 44122	Title	VP, CFO
	Title	VP, SECRETARY	Name	FEARON, RICHARD H
	Name	WRIGHT, LIZBETH L	Address	1000 EATON BOULEVARD
	Address	1000 EATON BOULEVARD	City-State-Zip:	
	City-State-Zip:	CLEVELAND OH 44122	,	
			Continues on page 2	

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		