

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 804908

**Entity Name:** DIEBOLD, INCORPORATED

**Current Principal Place of Business:**

5995 MAYFAIR RD  
CANTON, OH 44720

**Current Mailing Address:**

PO BOX 3077  
CANTON, OH 44720-8077 US

**FEI Number:** 34-0183970

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FAMRS ROAD #221E  
PALM BEACH GARDENS, FL 33410 US

*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

**Officer/Director Detail :**

Title P, CEO, D  
Name MATTES, ANDREAS W.  
Address 5995 MAYFAIR RD  
City-State-Zip: NORTH CANTON OH 44720

Title S, CHIEF LEGAL OFFICER, SVP  
Name LEIKEN, JONATHAN B.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title SVP, CFO  
Name CHAPMAN, CHRISTOPHER A.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title SVP, STRATEGIC PROJECTS  
Name MERZ, STEFAN E.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title VP, CHIEF COMMUNICATIONS OFFICER  
Name KRISTOFF, JOHN D.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title VP, CHIEF HUMAN RESOURCES OFFICER  
Name RUTT, SHEILA M.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title NON-EXECUTIVE CHAIRMAN  
Name WALLACE , HENRY D. G.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title D  
Name ALLENDER, PATRICK W.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

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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 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:** LEIKEN , JONATHAN B.

**SECRETARY**

01/14/2016

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title D  
Name COX, PHILLIP R.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title D  
Name FITZGERALD, GALE S.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title D  
Name PRATHER, JR., ROBERT S.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title D  
Name WEBER, ALAN J.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title D  
Name CRANDALL, RICHARD L.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title D  
Name GREENFIELD, GARY G.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720

Title D  
Name SOIN, RAJESH K.  
Address 5995 MAYFAIR RD  
City-State-Zip: CANTON OH 44720