

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 817863

Entity Name: COOPER WIRING DEVICES, INC.**Current Principal Place of Business:**1000 EATON BLVD.
CLEVELAND, OH 44122**Current Mailing Address:**1000 EATON BLVD.
MAIL CODE 2N
CLEVELAND, OH 44122 US**FEI Number:** 11-0701510**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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	PRESIDENT
Name	BOISE, APRIL MILLER
Address	1000 EATON BOULEVARD
City-State-Zip:	CLEVELAND OH 44122

Title	VP, TREASURER
Name	PARK, KIRSTEN
Address	1000 EATON BOULEVARD
City-State-Zip:	CLEVELAND OH 44122

Title	VP, CONTROLLER, DIRECTOR
Name	HOPGOOD, DANIEL
Address	1000 EATON BOULEVARD
City-State-Zip:	CLEVELAND OH 44122

Title	VP, SECRETARY
Name	WRIGHT, LIZBETH L
Address	1000 EATON BOULEVARD
City-State-Zip:	CLEVELAND OH 44122

Title	VP, CFO, DIRECTOR
Name	OKRAY, THOMAS B
Address	1000 EATON BOULEVARD
City-State-Zip:	CLEVELAND OH 44122

Title	VP, ASST. SECRETARY
Name	SZMAGALA, TARAS G
Address	1000 EATON BLVD.
City-State-Zip:	CLEVELAND OH 44122

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: KIRSTEN PARK**TREASURER****04/27/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date