

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000001271

Entity Name: NALCO TWO, INC.

**Current Principal Place of Business:**

1601 WEST DIEHI ROAD  
NAPERVILLE, IL 60563-1198

**Current Mailing Address:**

1601 WEST DIEHI ROAD  
NAPERVILLE, IL 60563-1198

FEI Number: 36-4023948

Certificate of Status Desired: No

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

C T 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 DP  
Name GIBSON, STANLEY J  
Address 1601 WEST DIEHI ROAD  
City-State-Zip: NAPERVILLE IL 60563-1198

Title TREASURER  
Name CHEW, CHING-MENG  
Address 1601 WEST DIEHI ROAD  
City-State-Zip: NAPERVILLE IL 60563-1198

Title AT  
Name MITCHELL, DAVID J  
Address 1601 WEST DIEHI ROAD  
City-State-Zip: NAPERVILLE IL 60563-1198

Title S, DIRECTOR  
Name MURPHY, MICHAEL P  
Address 1601 WEST DIEHI ROAD  
City-State-Zip: NAPERVILLE IL 60563-1198

Title ASSISTANT SECRETARY  
Name DUVICK, DAVID F  
Address 1601 W. DIEHL ROAD  
City-State-Zip: NAPERVILLE IL 60563

Title COO  
Name HANDLEY, THOMAS W  
Address 1601 W. DIEHL ROAD  
City-State-Zip: NAPERVILLE IL 60563

Title VICE PRESIDENT  
Name MCNAMARA, JUDY  
Address 1601 W. DIEHL ROAD  
City-State-Zip: NAPERVILLE IL 60563

*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: MURPHY, MICHAEL P

SECRETARY

02/09/2016

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date