

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000001449

Entity Name: CRANE PAYMENT INNOVATIONS, INC.

Current Principal Place of Business:

3222 PHOENIX PIKE SUITE 200
MALVERN, PA 19355

Current Mailing Address:

C/O CRANE CO.
100 FIRST STAMFORD PLACE 4TH FLOOR EAST
STAMFORD, CT 06902 US

FEI Number: 22-2854526

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 PRESIDENT, DIRECTOR
Name GALLO, KURT F.
Address 3222 PHOENIXVILLE PIKE
 SUITE 200
City-State-Zip: MALVERN PA 19355

Title VICE PRESIDENT, FINANCE & CFO
Name SHERWOOD, RAYMOND C
Address 3222 PHOENIXVILLE PIKE
 SUITE 200
City-State-Zip: MALVERN PA 19355

Title VP GENERAL COUNSEL, SECRETARY
Name D'ORIO, ANTHONY M
Address C/O CRANE CO.
 100 FIRST STAMFORD PLACE 4TH
 FLOOR EAST
City-State-Zip: STAMFORD CT 06902

Title ASSISTANT TREASURER
Name PASSARELLI, SINA A
Address 100 FIRST STAMFORD PLACE
 4TH FLOOR EAST
City-State-Zip: STAMFORD CT 06902

Title ASSISTANT TREASURER, ASSISTANT
 SECRETARY
Name ALLADEEN, NASRUDEEN
Address C/O CRANE CO.
 100 FIRST STAMFORD PLACE 4TH
 FLOOR EAST
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR
Name MITCHELL, MAX H
Address C/O CRANE CO.
 100 FIRST STAMFORD PLACE 4TH
 FLOOR EAST
City-State-Zip: STAMFORD CT 06902

Title DIRECTOR
Name MAUE, RICHARD A
Address C/O CRANE CO.
 100 FIRST STAMFORD PLACE 4TH
 FLOOR EAST
City-State-Zip: STAMFORD CT 06902

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: SINA PASSARELLI

ASST. TREASURER

04/26/2019

Electronic Signature of Signing Officer/Director Detail

Date