

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000001449

**Entity Name:** CRANE PAYMENT INNOVATIONS, INC.

**Current Principal Place of Business:**

3222 PHOENIXVILLE PIKE,  
SUITE 200  
MALVERN, PA 19355

**Current Mailing Address:**

3222 PHOENIXVILLE PIKE,  
SUITE 200  
MALVERN, PA 19355 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  
Name            BAUWE, JAN-HINRIK  
Address        3222 PHOENIXVILLE PIKE,  
                  SUITE 200  
City-State-Zip: MALVERN PA 19355

Title            VP, SECRETARY  
Name            D'IORIO, ANTHONY M.  
Address        3222 PHOENIXVILLE PIKE,  
                  SUITE 200  
City-State-Zip: MALVERN PA 19355

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

Title            DIRECTOR  
Name            MAUE, RICHARD A.  
Address        3222 PHOENIXVILLE PIKE,  
                  SUITE 200  
City-State-Zip: MALVERN PA 19355

Title            DIRECTOR  
Name            MITCHELL, MAX H.  
Address        3222 PHOENIXVILLE PIKE,  
                  SUITE 200  
City-State-Zip: MALVERN PA 19355

Title            VP, CFO  
Name            MOORE, JOSEPH D.  
Address        3222 PHOENIXVILLE PIKE,  
                  SUITE 200  
City-State-Zip: MALVERN PA 19355

Title            VP, TREASURER  
Name            SWITTER, EDWARD S.  
Address        3222 PHOENIXVILLE PIKE,  
                  SUITE 200  
City-State-Zip: MALVERN PA 19355

Title            ASSISTANT TREASURER  
Name            NASRUDEEN , ALLADEEN  
Address        3222 PHOENIXVILLE PIKE,  
                  SUITE 200  
City-State-Zip: MALVERN PA 19355

*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:** ALLADEEN, NASRUDEEN

**ASSISTANT TREASURER    02/24/2023  
& ASSISTANT  
SECRETARY**

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

\_\_\_\_\_  
Date

