

**2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F10000002565

**FILED**  
**Apr 14, 2017**  
**Secretary of State**  
**CC2319028238**

**Entity Name:** HAYNES INTERNATIONAL, INC.

**Current Principal Place of Business:**

1020 WEST PARK AVENUE  
P.O. BOX 9013  
KOKOMO, IN 46904-9013

**Current Mailing Address:**

1020 WEST PARK AVENUE  
P.O. BOX 9013  
KOKOMO, IN 46904-9013 US

**FEI Number:** 06-1185400

**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 CORPORATE SECRETARY  
Name GUNST, JANICE W.  
Address 1020 WEST PARK AVENUE  
P.O. BOX 9013  
City-State-Zip: KOKOMO IN 46904-9013

Title VICE PRESIDENT-FINANCE, CFO AND  
TREASURER  
Name MAUDLIN, DANIEL W.  
Address 1020 WEST PARK AVENUE  
P.O. BOX 9013  
City-State-Zip: KOKOMO IN 46904-9013

Title DIRECTOR  
Name WALL, WILLIAM  
Address 1020 WEST PARK AVENUE  
P.O. BOX 9013  
City-State-Zip: KOKOMO IN 46904-9013

Title CHIEF ACCOUNTING OFFICER  
Name VAN BIBBER, DAVID  
Address 1020 WEST PARK AVENUE  
P.O. BOX 9013  
City-State-Zip: KOKOMO IN 46904-9013

Title PRESIDENT/DIRECTOR  
Name COMERFORD, MARK  
Address 1020 WEST PARK AVENUE  
P.O. BOX 9013  
City-State-Zip: KOKOMO IN 46904-9013

Title DIRECTOR  
Name SHOR, MICHAEL L.  
Address 1020 WEST PARK AVENUE  
P.O. BOX 9013  
City-State-Zip: KOKOMO IN 46904-9013

Title DIRECTOR  
Name MCCARTHY, TIMOTHY J.  
Address 1020 WEST PARK AVENUE  
P.O. BOX 9013  
City-State-Zip: KOKOMO IN 46904-9013

Title DIRECTOR  
Name GETZ, ROBERT H.  
Address 1020 WEST PARK AVENUE  
P.O. BOX 9013  
City-State-Zip: KOKOMO IN 46904-9013

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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:** DAVID VAN BIBBER

**CHIEF ACCOUNTING  
OFFICER**

**04/14/2017**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           CAMPION, DONALD C.  
Address        1020 WEST PARK AVENUE  
                P.O. BOX 9013  
City-State-Zip: KOKOMO IN 46904-9013

Title           CHAIRMAN OF THE BOARD  
Name           COREY, JOHN  
Address        1020 WEST PARK AVENUE  
                P.O. BOX 9013  
City-State-Zip: KOKOMO IN 46904-9013