

**2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F11000003763

Entity Name: XYLEM INC.

**Current Principal Place of Business:**

1 INTERNATIONAL DRIVE  
RYE BROOK, NY 10573

**Current Mailing Address:**

1 INTERNATIONAL DRIVE  
RYE BROOK, NY 10573 US

FEI Number: 45-2080495

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, CEO, DIRECTOR  
Name            DECKER, PATRICK  
Address        1 INTERNATIONAL DRIVE  
City-State-Zip: RYE BROOK NY 10573

Title            CFO  
Name            RAJKOWSKI, MARK  
Address        1 INTERNATIONAL DRIVE  
City-State-Zip: RYE BROOK NY 10573

Title            CORPORATE VICE PRESIDENT AND  
                  TREASURER  
Name            PATEL, SAMIR  
Address        1 INTERNATIONAL DRIVE  
City-State-Zip: RYE BROOK NY 10573

Title            VP, ASSISTANT CORPORATE  
                  SECRETARY  
Name            O'SHEA, KELLY  
Address        1 INTERNATIONAL DRIVE  
City-State-Zip: RYE BROOK NY 10573

Title            ASST. SECRETARY  
Name            ROSS, GARY  
Address        1 INTERNATIONAL DRIVE  
City-State-Zip: RYE BROOK NY 10573

*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: GARY ROSS

ASSISTANT SECRETARY    02/20/2020

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

\_\_\_\_\_ Date