## 2025 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F15000004085

Entity Name: BABCOCK & WILCOX ENTERPRISES, INC.

**Current Principal Place of Business:** 

1200 E. MARKET STREET SUITE 650

AKRON, OH 44305

**Current Mailing Address:** 

1200 E. MARKET STREET

SUITE 650

AKRON, OH 44305 US

FEI Number: 47-2783641 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED AGENT GROUP INC. 801 US HWY 1

N PALM BEACH, FL 33408 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: JON-MICHAEL SANCHEZ, SPECIAL SECRETARY 04/17/2025

Electronic Signature of Registered Agent

Date

**FILED** Apr 17, 2025

**Secretary of State** 

2519668804CC

Officer/Director Detail:

**EXECUTIVE VICE PRESIDENT AND** Title

CHIEF OPERATING OFFICER

Name MORGAN, JIMMY B.

Address 1200 E. MARKET STREET

SUITE 650

City-State-Zip: AKRON OH 44305

Title SENIOR VICE PRESIDENT, THERMAL

RIKER, CHRISTOPHER S Name

1200 E. MARKET STREET Address

SUITE 650

AKRON OH 44305 City-State-Zip:

Title SENIOR VICE PRESIDENT, CLEAN

**ENERGY** 

BUCKLER, JOSEPH T Name

1200 E. MARKET STREET Address

SUITE 650

AKRON OH 44305 City-State-Zip:

Title EXECUTIVE VICE PRESIDENT, CHIEF

FINANCIAL OFFICER AND CHIEF

ACCOUNTING OFFICER

JR., LOUIS SALAMONE Name

1200 E. MARKET STREET Address

SUITE 650

City-State-Zip: AKRON OH 44305 Title ASSISTANT TREASURER

Name SHABAYA, RONALD

Address 1200 E. MARKET STREET

SUITE 650

AKRON OH 44305 City-State-Zip:

CHIEF EXECUTIVE OFFICER / Title

DIRECTOR

YOUNG, KENNETH M Name

1200 E. MARKET STREET Address

**SUITE 650** 

AKRON OH 44305 City-State-Zip:

Title ASSISTANT SECRETARY

SAUS, AMY M. Name

Address 1200 E. MARKET STREET

SUITE 650

City-State-Zip: AKRON OH 44305

Title EXECUTIVE VICE PRESIDENT AND

GENERAL COUNSEL AND CORP.

SECRETARY

Name DZIEWISZ, JOHN J

1200 E. MARKET STREET Address

SUITE 650

City-State-Zip: AKRON OH 44305

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and that my electronic signature shall have the same legal effect as if made under I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electron 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.

04/17/2025 SIGNATURE: ASHLEY N COLANDO

AKRON OH 44305

City-State-Zip:

Electronic Signature of Signing Officer/Director Detail

Date

## Officer/Director Detail Continued:

City-State-Zip:

AKRON OH 44305

Title ASSISTANT SECRETARY Title DIRECTOR

Name COLANDO, ASHLEY N Name BARTOLI, HENRY E

Address 1200 E. MARKET STREET Address 1200 E. MARKET STREET

SUITE 650 SUITE 650

Title DIRECTOR Title TREASURER

Name MOELLER, PHILIP D Name CARLSON, RODNEY E

Address 1200 E. MARKET STREET Address 1200 E. MARKET STREET

SUITE 650 SUITE 650

City-State-Zip: AKRON OH 44305 City-State-Zip: AKRON OH 44305

Title DIRECTOR Title DIRECTOR

Name TATO, JOSEPH A Name STAHL, REBECCA L

Address 1200 E. MARKET STREET Address 1200 E. MARKET STREET

SUITE 650 SUITE 650

City-State-Zip: AKRON OH 44305 City-State-Zip: AKRON OH 44305

Title DIRECTOR Title DIRECTOR

Name HOWE, ALAN B Name BONESS, NAOMI L.

Address 1200 E. MARKET STREET Address 1200 E. MARKET STREET

SUITE 650 SUITE 650

City-State-Zip: AKRON OH 44305 City-State-Zip: AKRON OH 44305