DOCUMENT# F20000004818

Entity Name: HUBBELL INCORPORATED

Current Principal Place of Business:

40 WATERVIEW DR. SHELTON, CT 06484

Current Mailing Address:

40 WATERVIEW DR. SHELTON, CT 06484

FEI Number: 06-0397030

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US FILED Sep 16, 2022 Secretary of State 5584635559CC

Date

Certificate of Status Desired: No

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

Officer/Director Detail :

•			
Title	PRESIDENT, CEO, CHAIRMAN, DIRECTOR	Title	SECRETARY, SENIOR VICE PRESIDENT, GENERAL COUNSEL
Name	BAKKER, GERBEN	Name	LANE, KATHERINE A.
Address	40 WATERVIEW DR.	Address	40 WATERVIEW DR.
City-State-Zip:	SHELTON CT 06484	City-State-Zip:	SHELTON CT 06484
Title	CFO, EXECUTIVE VICE PRESIDENT	Title	VP, CONTROLLER
Name	SPERRY, WILLIAM R.	Name	DEL NERO, JONATHAN M.
Address	40 WATERVIEW DR.	Address	40 WATERVIEW DR.
City-State-Zip:	SHELTON CT 06484	City-State-Zip:	SHELTON CT 06484
Title	TREASURER	Title	DIRECTOR
Name	MURPHY, JONATHON BARRY	Name	GUZZI , ANTHONY J.
Address	40 WATERVIEW DR.	Address	40 WATERVIEW DR.
City-State-Zip:	SHELTON CT 06484	City-State-Zip:	SHELTON CT 06484
T :41 -		Title	DIRECTOR
Title	DIRECTOR		
Name	LIND, BONNIE C.	Name	CARDOSO, CARLOS M.
Address	40 WATERVIEW DR.	Address	40 WATERVIEW DR.
City-State-Zip:	SHELTON CT 06484	City-State-Zip:	SHELTON CT 06484

Continues on page 2

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: KATHERINE A. LANE

SECRETARY

09/16/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	CHIEF TECHNOLOGY OFFICER	Title	GROUP PRESIDENT UTILITY
Name	BERNARD, ALEXIS P.	Name	SOLUTIONS SEGMENT CONNOLLY, ALLAN J.
Address	40 WATERVIEW DR.		
City-State-Zip:	SHELTON CT 06484	Address	40 WATERVIEW DR.
		City-State-Zip:	SHELTON CT 06484
Title	SUPERVISOR CHIEF HUMAN RESOURCES OFFICER	Title	CHIEF INFORMATION OFFICER
Name	FLYNN, ALYSSA R.	Name	MARQUARDT, DREW M.
Address	40 WATERVIEW DR.	Address	40 WATERVIEW DR.
City-State-Zip:	SHELTON CT 06484	City-State-Zip:	SHELTON CT 06484
Title	DIRECTOR	Title	DIRECTOR
Name	POLLINO, JENNIFER M.	Name	MALLOY, JOHN F.
Address	40 WATERVIEW DR.	Address	40 WATERVIEW DR.
		City-State-Zip:	SHELTON CT 06484
City-State-Zip:	SHELTON CT 06484		
Title	DIRECTOR	Title	DIRECTOR
Name	RUSSELL, JOHN G.	Name	KEATING, NEAL J.
Address	40 WATERVIEW DR.	Address	40 WATERVIEW DR.
City-State-Zip:	SHELTON CT 06484	City-State-Zip:	SHELTON CT 06484
Title	GROUP PRESIDENT ELECTRICAL SOLUTIONS SEGMENT	Title	DIRECTOR
		Name	HERNANDEZ, RHETT A.
Name	LAU, PETER J.	Address	40 WATERVIEW DR.
Address	40 WATERVIEW DR.	City-State-Zip:	SHELTON CT 06484
City-State-Zip:	SHELTON CT 06484		
Title	VP CUSTOMER EXPERIENCE		
Name	WATSON, TERRIEL D.		

- Address 40 WATERVIEW DR.
- City-State-Zip: SHELTON CT 06484