

**2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F95000003357

**Entity Name:** WACO FILTERS CORPORATION

**Current Principal Place of Business:**

2546 GENERAL ARMISTEAD AVE.  
NORRISTOWN, PA 19403

**Current Mailing Address:**

2546 GENERAL ARMISTEAD AVE.  
NORRISTOWN, PA 19403 US

**FEI Number:** 23-2386877

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CT 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 ASSISTANT SECRETARY  
Name VANGETSON, AARON  
Address 2546 GENERAL ARMISTEAD AVE.  
City-State-Zip: NORRISTOWN PA 19403

Title VP  
Name VANGETSON, AARON  
Address 2546 GENERAL ARMISTEAD AVE.  
City-State-Zip: NORRISTOWN PA 19403

Title TREASURER  
Name UDELHOFEN, JOHN  
Address 2546 GENERAL ARMISTEAD AVE.  
City-State-Zip: NORRISTOWN PA 19403

Title SECRETARY  
Name UDELHOFEN, JOHN  
Address 2546 GENERAL ARMISTEAD AVE.  
City-State-Zip: NORRISTOWN PA 19403

Title VP  
Name UDELHOFEN, JOHN  
Address 2546 GENERAL ARMISTEAD AVE.  
City-State-Zip: NORRISTOWN PA 19403

Title VP  
Name BALL, DAVID  
Address 2546 GENERAL ARMISTEAD AVE.  
City-State-Zip: NORRISTOWN PA 19403

Title PRESIDENT / CEO  
Name KELSO, THERESA  
Address 2546 GENERAL ARMISTEAD AVE.  
City-State-Zip: NORRISTOWN PA 19403

Title DIRECTOR  
Name UDELHOFEN, JOHN  
Address 2546 GENERAL ARMISTEAD AVE.  
City-State-Zip: NORRISTOWN PA 19403

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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:** THERESA KELSO

**DIRECTOR**

**04/22/2021**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title           DIRECTOR  
Name           BALL, DAVID  
Address        2546 GENERAL ARMISTEAD AVE.  
City-State-Zip: NORRISTOWN PA 19403

Title           DIRECTOR  
Name           KELSO, THERESA  
Address        2546 GENERAL ARMISTEAD AVE.  
City-State-Zip: NORRISTOWN PA 19403