

**2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F96000004511

**Entity Name:** ABB INSTALLATION PRODUCTS INC.**Current Principal Place of Business:**305 GREGSON DRIVE  
CARY, NC 27511**Current Mailing Address:**305 GREGSON DRIVE  
CARY, NC 27511 US**FEI Number:** 22-1326940**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  
Name            SULLIVAN, FRANKLIN BEEBE  
Address        860 RIDGE LAKE BLVD.  
City-State-Zip: MEMPHIS TN 38120

Title            VP  
Name            TAKATS, ATTILA  
Address        305 GREGSON DRIVE  
City-State-Zip: CARY NC 27511

Title            SECRETARY  
Name            SMITH, W. DAVID JR.  
Address        860 RIDGE LAKE BLVD.  
City-State-Zip: MEMPHIS TN 38120

Title            DIRECTOR  
Name            NILSSON, CHRISTIAN  
Address        305 GREGSON DRIVE  
City-State-Zip: CARY NC 27511

Title            DIRECTOR  
Name            ONUSCHECK, DAVID  
Address        305 GREGSON DRIVE  
City-State-Zip: CARY NC 27511

Title            DIRECTOR  
Name            SCHEU, GREG  
Address        305 GREGSON DRIVE  
City-State-Zip: CARY NC 27511

*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:** W. DAVID SMITH JR.**SECRETARY****03/28/2019**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date