

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F97000002966

**FILED**  
**Apr 24, 2015**  
**Secretary of State**  
**CC8195557638**

**Entity Name:** MOMENTIVE PERFORMANCE MATERIALS QUARTZ, INC.

**Current Principal Place of Business:**

22557 WEST LUNN ROAD  
STRONGSVILLE, OH 44136

**Current Mailing Address:**

1 PLASTICS AVENUE  
PITTSFIELD, MA 01201 US

**FEI Number: 34-1839929**

**Certificate of Status Desired: No**

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

NRAI SERVICES, INC  
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 CFO  
Name BERGER, BRIAN  
Address 260 HUDSON RIVER ROAD  
City-State-Zip: WATERFORD NY 12188

Title SECRETARY, DIRECTOR  
Name JOHNS, DOUGLAS A  
Address 260 HUDSON RIVER ROAD  
City-State-Zip: ALBANY NY 12188

Title TREASURER  
Name KNIGHT, GEORGE  
Address 180 EAST BROAD STREET  
City-State-Zip: COLUMBUS OH 43215

Title PRESIDENT, DIRECTOR  
Name REYES, JOSEPH  
Address 22557 WEST LUNN ROAD  
City-State-Zip: STRONGSVILLE OH 44149

Title DIRECTOR  
Name GREENE, ANTHONY B  
Address 180 EAST BROAD STREET  
City-State-Zip: COLUMBUS OH 43215

*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: DOUGLAS A JOHNS**

**SECRETARY**

**04/24/2015**

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

\_\_\_\_\_  
Date