

2019 FOREIGN PROFIT CORPORATION ANNUAL REPORT

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Mar 25, 2019
Secretary of State
9109198858CC

Entity Name: HAMILTON SUNDSTRAND CORPORATION

Current Principal Place of Business:

2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE
CHARLOTTE, NC 28217

Current Mailing Address:

2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE
CHARLOTTE, NC 28217 US

FEI Number: 06-1543584

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 VP
Name KRONHOLM, CANDACE A.
Address 2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE
City-State-Zip: CHARLOTTE NC 28217

Title VP
Name BALSBOUGH, DOUGLAS J.
Address 2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE
City-State-Zip: CHARLOTTE NC 28217

Title VP
Name LEONARD, MARTHA A.
Address 2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE
City-State-Zip: CHARLOTTE NC 28217

Title PRESIDENT, DIRECTOR
Name GITLIN, DAVID L.
Address 2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE
City-State-Zip: CHARLOTTE NC 28217

Title ASST. SECRETARY
Name MARTIN, JACQUELINE A.
Address 2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE
City-State-Zip: CHARLOTTE NC 28217

Title VP, SECRETARY, DIRECTOR
Name FEDDERSEN, CHRISTOPH T.
Address 2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE
City-State-Zip: CHARLOTTE NC 28217

Title VP, TREASURER, DIRECTOR
Name ALLEN, PATRICK E.
Address 2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE
City-State-Zip: CHARLOTTE NC 28217

Title DIRECTOR
Name ORTBERG, ROBERT K.
Address 2730 WEST TYVOLA ROAD
FOUR COLISEUM CENTRE
City-State-Zip: CHARLOTTE NC 28217

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: JACQUELINE A. MARTIN

ASST. SECRETARY

03/25/2019

Electronic Signature of Signing Officer/Director Detail

Date