

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000003728

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	PRESIDENT, CUSTOMER SERVICE
Name	EGNOTOVICH, CYNTHIA M.
Address	2730 WEST TYVOLA ROAD FOUR COLISEUM CENTRE
City-State-Zip:	CHARLOTTE NC 28217

Title	VP, GENERAL COUNSEL AND SECRETARY - AIRCRAFT SYSTEMS, DIRECTOR
Name	CALIO, CHRISTOPHER T.
Address	2730 WEST TYVOLA ROAD FOUR COLISEUM CENTRE
City-State-Zip:	CHARLOTTE NC 28217

Title	VICE PRESIDENT FINANCE, TREASURER & CFO - AIRCRAFT SYSTEMS
Name	PORTER, DAVID L.
Address	2730 WEST TYVOLA ROAD FOUR COLISEUM CENTRE
City-State-Zip:	CHARLOTTE NC 28217
Title	ASSISTANT SECRETARY
Name	BOYD, ANNE N.
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: ANNE N. BOYD**ASSISTANT SECRETARY** 04/15/2013_____
Electronic Signature of Signing Officer/Director Detail_____
Date