

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P40947

Entity Name: FANUC AMERICA CORPORATION**Current Principal Place of Business:**3900 W HAMLIN RD
ROCHESTER HILLS, MI 48309**Current Mailing Address:**3900 W HAMLIN RD
ROCHESTER HILLS, MI 48309 US**FEI Number:** 38-3067354**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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, DIRECTOR
Name SCHNEIDER, R.E.
Address 3900 W HAMLIN
City-State-Zip: ROCHESTER HILLS MI 48309

Title VP, DIRECTOR
Name STANKO, STEVE
Address 3900 W HAMLIN
City-State-Zip: ROCHESTER HILLS MI 48309

Title VP, DIRECTOR
Name FINCHER, ROBERT
Address 3900 W HAMLIN
City-State-Zip: ROCHESTER HILLS MI 48309

Title VP, DIRECTOR
Name SHIMADA, NAOKI
Address 3900 W HAMLIN RD
City-State-Zip: ROCHESTER HILLS MI 48309

Title VP, DIRECTOR
Name KARR, JON
Address 3900 W HAMLIN
City-State-Zip: ROCHESTER HILLS MI 48309

Title VP, DIRECTOR
Name OSTBY, N KEVIN
Address 3900 W HAMLIN
City-State-Zip: ROCHESTER HILLS MI 48309

Title VP, DIRECTOR
Name DENNY, ANDY
Address 3900 W. HAMLIN RD
City-State-Zip: ROCHESTER HILLS MI 48309

Title DIRECTOR
Name ABE, KEN
Address 3900 W HAMLIN RD
City-State-Zip: ROCHESTER HILLS MI 48309

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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: STEVE STANKO

VP

04/16/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name INABA, YOSHIHARU DR.
Address 3580 SHIBOKUSA AZA-KOMANBA
OSHINO-MURA
City-State-Zip: YAMANASHI 401-05

Title DIRECTOR
Name KOHARI, KATSUO
Address 3580 SHIBOKUSA
OSHINO-MURA
City-State-Zip: YAMANASHI 401-05

Title DIRECTOR
Name INABA, KIYONORI DR.
Address 3580 SHIBOKUSA
OSHINO-MURA
City-State-Zip: YAMANASHI 401-05

Title AUDITOR
Name ERMACHKOVA, SVETLANA DR.
Address 3580 SHIBOKUSA
OSHINO-MURA
City-State-Zip: YAMANASHI 401-05

Title DIRECTOR
Name WASHIDO, MICHIAKI
Address 1800 LAKEWOOD BLVD
City-State-Zip: HOFFMAN ESTATES IL 60192

Title DIRECTOR
Name UCHIDA, KIROUYUKI
Address 3580 SHIBOKUZA
OSHINO-MURA
City-State-Zip: YAMANASHI 401-05

Title DIRECTOR
Name HARADA, KIROUYUKI
Address 3580 SHIBOKUSA
OSHINO-MURA
City-State-Zip: YAMANASHI 401-05