

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 29, 1999 8:00 am
Secretary of State

06-29-1999 90009 047 ***550.00

DOCUMENT # 816047

1. Corporation Name
HARDINGE INC.

Principal Place of Business
ONE HARDINGE DRIVE
ELMIRA NY 14902
US

Mailing Address
P O BOX 1507
ELMIRA NY 14902
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/08/1962

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

16-0470200

Applied For

Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation owes the current year Intangible Personal Property Tax. Yes No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	CEO	<input type="checkbox"/> DELETE
NAME	AGAN, ROBERT E.	
STREET ADDRESS	309 HOLLEY ROAD	
CITY-ST-ZIP	ELMIRA NY	
TITLE	CEOP	<input checked="" type="checkbox"/> DELETE
NAME	GIBSON, MALCOLM L.	
STREET ADDRESS	109 REDWING LANE	
CITY-ST-ZIP	HORSEHEADS NY	
TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	GREENLEE, DOUGLAS A	
STREET ADDRESS	205 KENNEDY DR	
CITY-ST-ZIP	HORSEHEADS NY	
TITLE	VPF	<input type="checkbox"/> DELETE
NAME	SIMONS, RICHARD	
STREET ADDRESS	1219 W CLINTON ST	
CITY-ST-ZIP	ELMIRA NY	
TITLE	PCOO	<input checked="" type="checkbox"/> DELETE
NAME	KRUL, ALLAN J	
STREET ADDRESS	109 MONROE DR	
CITY-ST-ZIP	HORSEHEADS NY	
TITLE	T	<input type="checkbox"/> DELETE
NAME	CONNELLY, THOMAS T	
STREET ADDRESS	114 COUNTRY CLUB DR	
CITY-ST-ZIP	ELMIRA NY	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

Please see attached lists

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an addres, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/27/99 (607) 734-228

Date

HARDINGE INC.
One Hardinge Drive
Elmira, NY 14902-1507

816047
580678-90009-47

OFFICERS, 1999

Robert E. Agan
Chairman of the Board
President/C.E.O.
309 Holley Road
Elmira, NY 14905

Ann M. Kuntz
Assistant Treasurer
38 Coleman Avenue
Elmira, NY 14905

Richard C. Amadril
Vice President, Sales & Marketing
611 Decker Avenue
Elmira, NY 14904

Joseph W. Schiefen
Assistant Treasurer
213 Timothy Lane
Horseheads, NY 14845

Joseph T. Colvin
Vice President, Manufacturing
27 Barrington Road
Horseheads, NY 14845

Richard L. Simons
Senior Vice President/C.F.O.
1219 W. Clinton Street
Elmira, NY 14905

Thomas T. Connelly
Treasurer
114 Country Club Drive
Elmira, NY 14905

Daniel P. Soroka
Vice President, Engineering
117 Monroe Drive
Horseheads, NY 14845

J. Patrick Ervin
Executive Vice President, Operations
90 Morningside Drive
Elmira, NY 14905

Douglas C. Tift
Vice President, Administration
70 Durland Avenue
Elmira, NY 14905

J. Philip Hunter
Secretary
1232 W. Clinton Street
Elmira, NY 14905

HARDINGE INC.
One Hardinge Drive
Elmira, NY 14902-1507

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DIRECTORS, 1999

Robert E. Agan
309 Holley Road
Elmira, NY 14905

Douglas A. Greenlee
P.O. Box 3149
Elmira, NY 14905

John W. Bennett
111 Woodland Park
Pine City, NY 14871

Atty. J. Philip Hunter
1232 W. Clinton Street
Elmira, NY 14905

Daniel J. Burke
15 Longford Farm Drive
Elmira, NY 14903

Mr. Albert W. Moore
9703 Mossy Stone Court
Vienna, VA 22182

Richard J. Cole
742 Partridge Place
Endwell, NY 13760

James L. Flynn
12039 Churchill Place
Big Flats, NY 14814

E. Martin Gibson
151 Terrapin Point
Vero Beach, FL 32963