## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#816047**

Entity Name: HARDINGE INC.

FILED Apr 18, 2007 Secretary of State

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
ONE HARI ELMIRA, N	DINGE DRIVE Y 14902 U	S				
Current Mailing Address:			New Mail	New Mailing Address:		
P O BOX 1 ELMIRA, N		S				
FEI Number:	16-0470200	FEI Number Applied For ( )	FEI Number Not App	oplicable ( ) Certificate of Status Desired ( )		
Name and	Address of C	urrent Registered Agent:	Name and	d Address of New Registered Agent:		
1200 S. PIN	DRATION SYS NE ISLAND RO ON, FL 33324	)AD				
The above in the State		submits this statement for the pur	pose of changing	g its registered office or registered agent, or both,		
SIGNATUF	RE:					
	Electron	ic Signature of Registered Agent	t	Date		
Election Can	npaign Financing	Trust Fund Contribution ( ).				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PC () ERVIN, J. PATR 27 DUBLIN DRI <sup>1</sup> ELMIRA, NY 14	<b>V</b> E	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Title: Name: Address: City-St-Zip:	SD () HUNTER, PHILL ONE WEST CHI ELMIRA, NY 14	JRCH STREET	Title: Name: Address: City-St-Zip:	SD (X) Change ( ) Addition HUNTER, PHILLIP J 1232 WEST CLINTON STREET ELMIRA, NY 14905 US		
Title: Name: Address: City-St-Zip:	V () TREGO, JR, CH 161A VETERAN HORSEHEADS,	HILL ROAD	Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition TREGO, JR, CHARLES R 85 QUAIL RUN ELMIRA, NY 14903 US		
Title: Name: Address: City-St-Zip:	T () HENDRICK, RIC 222 FAIRFIELD HORSEHEADS,	CHARD B DRIVE	Title: Name: Address: City-St-Zip:	T (X) Change () Addition BAKER, KELLY R 44 QUAIL RUN ELMIRA, NY 14903 US		
Title: Name: Address: City-St-Zip:	V () COLVIN, JOSEF 27 BARRINGTO HORSEHEADS,	N ROAD	Title: Name: Address: City-St-Zip:	V (X) Change ( ) Addition COLVIN, JOSEPH T 27 BARRINGTON ROAD HORSEHEADS, NY 14845 US		
Title: Name: Address: City-St-Zip:	V () TIFFT, DOUGLA 70 DURLAND A' ELMIRA, NY 14	VENUE	Title: Name: Address: City-St-Zip:	()Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: KELLY R. BAKER T 04/18/2007