

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 816047

FILED
Apr 18, 2008
Secretary of State

Entity Name: HARDINGE INC.

Current Principal Place of Business:

ONE HARDINGE DRIVE
ELMIRA, NY 14902 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 1507
ELMIRA, NY 14902 US

New Mailing Address:

FEI Number: 16-0470200 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: ERVIN, J. PATRICK
Address: 27 DUBLIN DRIVE
City-St-Zip: ELMIRA, NY 14905 US

Title: SD () Delete
Name: HUNTER, PHILLIP J
Address: 1232 WEST CLINTON STREET
City-St-Zip: ELMIRA, NY 14905 US

Title: V () Delete
Name: TREGO, JR, CHARLES R
Address: 85 QUAIL RUN
City-St-Zip: ELMIRA, NY 14903 US

Title: T () Delete
Name: BAKER, KELLY R
Address: 44 QUAIL RUN
City-St-Zip: ELMIRA, NY 14903 US

Title: V () Delete
Name: COLVIN, JOSEPH T
Address: 27 BARRINGTON ROAD
City-St-Zip: HORSEHEADS, NY 14845 US

Title: V () Delete
Name: TIFFT, DOUGLAS C
Address: 70 DURLAND AVENUE
City-St-Zip: ELMIRA, NY 14905 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: AT (X) Change () Addition
Name: TRANTER, ELIZABETH M
Address: 116 KENNEDY DRIVE
City-St-Zip: HORSEHEADS, NY 14845 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ELIZABETH M. TRANTER

AT

04/18/2008

Electronic Signature of Signing Officer or Director

_____ Date