

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 24, 2005 8:00 am
Secretary of State

01-24-2005 90041 007 ***150.00

DOCUMENT # 847843

1. Entity Name
ABB DE INC.



Principal Place of Business

940 MAIN CAMPUS DR
500
RALEIGH, NC 27606 US

Mailing Address

9000 REGENCY PARKWAY
300
CARY, NC 27511 US

10001004



01102005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-3100018

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE VPT
NAME WESTIN, ANDERS
STREET ADDRESS 940 MAIN CAMPUS DRIVE, STE 500
CITY-ST-ZIP RALEIGH, NC

TITLE AS
NAME KOSMAR, JAMES M
STREET ADDRESS 940 MAIN CAMPUS, STE 500
CITY-ST-ZIP RALEIGH, NC

TITLE S
NAME ATTANASIO, JOHN R
STREET ADDRESS 940 MAIN CAMPUS DRIVE, STE 500
CITY-ST-ZIP RALEIGH, NC 27606

TITLE S
NAME ATTANASIO, JOHN R
STREET ADDRESS 940 MAIN CAMPUS DRIVE, STE 500
CITY-ST-ZIP PHILADELPHIA, PA 13

TITLE P
NAME SUIDEK, RICHARD J
STREET ADDRESS 940 MAIN CAMPUS DRIVE SUITE 500
CITY-ST-ZIP RALEIGH, NC 27606

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

J.M. Kosmar J.M. Kosmar

Date

1/14/05

Daytime Phone #