2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 847843

Entity Name: ABB DE INC.

FILED Jan 21, 2008 Secretary of State

	//85 52 114	O .				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
501 MERRI NORWALK	TT 7 5, CT 06856	US				
Current Mailing Address:			New Mailir	New Mailing Address:		
9000 REGENCY PARKWAY 300			200 REGEN 400	200 REGENCY FOREST 400		
CARY, NC 27511 US			CARY, NC	CARY, NC 27518 US		
FEI Number:	36-3100018	FEI Number Applied For ()	FEI Number Not Appli	icable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Name and Address of New Registered Agent:		
1200 SOUT	ORATION SYS TH PINE ISLAN DN, FL 33324					
The above in the State		ubmits this statement for the pur	pose of changing it	ts registered of	fice or registered agent, or both,	
SIGNATUR	!E:					
Electronic Signature of Registered Agent				Date		
Election Cam	paign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	CEO () E PALIWAL, DINES 501 MERRITT 7 NORWALK, CT (Title: Name: Address: City-St-Zip:	CEO (X) SANTACANA, EN 501 MERRITT 7 NORWALK, CT		
Title: Name: Address: City-St-Zip:	AS () E KOSMAR, JAMES 940 MAIN CAMPS RALEIGH, NC 27	JS, STE 500	Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	TR () E WENTWORTH, E 501 MERRITT 7 NORWALK, CT (Title: Name: Address: City-St-Zip:	()(Change () Addition	
Title: Name: Address: City-St-Zip:	VP ()[TUZIK, STEVEN 501 MERRITT 7 NORWALK, CT	Delete 430820685	Title: Name: Address: City-St-Zip:	()(Change ()Addition	

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: JAMES M KOSMAR AS 01/21/2008