

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000000041

FILED  
Apr 26, 2010  
Secretary of State

**Entity Name:** WHEELABRATOR AIR POLLUTION CONTROL, INC.

**Current Principal Place of Business:**

441 SMITHFIELD STREET  
PITTSBURGH, PA 15222

**New Principal Place of Business:**

501 GRANT STREET  
PITTSBURGH, PA 15222

**Current Mailing Address:**

441 SMITHFIELD STREET  
PITTSBURGH, PA 15222

**New Mailing Address:**

%SIEMENS CORPORATION  
170 WOOD AVENUE SOUTH  
ISELIN, NJ 08830

**FEI Number:** 06-1566213

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH 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: P  
Name: DOVALE, TONY  
Address: 501 GRANT STREET  
City-St-Zip: PITTSBURGH, PA 15219

Title: VP  
Name: CORNNELL, MICHAEL  
Address: 501 GRANT STREET  
City-St-Zip: PITTSBURGH, PA 15219

Title: AS  
Name: GOTLIFFE, ALAN  
Address: 170 WOOD AVENUE SOUTH  
City-St-Zip: ISELIN, NJ 08830

Title: CFO  
Name: JULIAN, RICH  
Address: 501 GRANT STREET  
City-St-Zip: PITTSBURGH, PA 15219

Title: S  
Name: FLYNN, CHRISTOPHER  
Address: 4400 ALAFAYA TRAIL  
City-St-Zip: ORLANDO, FL 32826

Title: D  
Name: WEEKS, CRAIG  
Address: 4400 ALAFAYA TRAIL  
City-St-Zip: ORLANDO, FL 32826

I hereby 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 all other like empowered.

**SIGNATURE:** ALAN GOTLIFFE

AS

04/26/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date