2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000465

FILED Apr 09, 2007 Secretary of State

Entity Name: EMERSON PROCESS MANAGEMENT POWER & WATER SOLUTIONS, INC.

Current Pi	rincipal Place	of Business:	New Princ	New Principal Place of Business:		
200 BETA PITTSBUR	DRIVE GH, PA 15238	2986 US				
Current Mailing Address:			New Maili	New Mailing Address:		
8100 W. FL	_ORISSANT A	/ENUE				
P.O. BOX 3		US				
FEI Number:	43-1811446	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and	Address	of New Registered Agent:	
1200 SOUT	ORATION SYS TH PINE ISLAN ON, FL 33324	ID ROAD				
	named entity s of Florida.	ubmits this statement for the p	ourpose of changing it	ts registere	ed office or registered agent, or both,	
SIGNATUF	RE:					
	Electron	c Signature of Registered Age	ent		Date	
Election Can	npaign Financing	Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () YEAGER, R 200 BETA DR PITTSBURGH, F	Delete PA 15238	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	BERRA, J. M	Delete CH BOULEVARD 759	Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	T () BURNETT, T. A 8100 W. FLORIS SAINT LOUIS, M		Title: Name: Address: City-St-Zip:		() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () KORDENBROCI 200 BETA DRIV PITTSBURGH, F	Ē	Title: Name: Address: City-St-Zip:	VP DICK, T. D 200 BETA I PITTSBURG	(X) Change()Addition DRIVE GH, PA 15238	
Title: Name: Address: City-St-Zip:	VP () GRAVES, S. A 8100 W. FLORIS SAINT LOUIS, M		Title: Name: Address: City-St-Zip:	VP BROWNLE 200 BETA I PITTSBURG		
Title: Name: Address: City-St-Zip:	S () PIETRALA, R. D 200 BETA DRIV PITTSBURGH, F	E	Title: Name: Address: City-St-Zip:	S JENSEN, J 12301 RES AUSTIN, TX	EARCH BLVD	

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: T. A. BURNETT T 04/09/2007