## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F01000002155

Title:

Name: Address:

City-St-Zip:

DF

KOELL, BERND

AUSTIN, TX 78728

(X) Delete

2400 GRAND AVENUE PARKWAY, SUITE 103

**FILED** Feb 06, 2007 Secretary of State

Entity Name: WINCOR NIXDORF INC. **Current Principal Place of Business: New Principal Place of Business:** 2400 GRAND AVENUE PARKWAY, SUITE 103 AUSTIN, TX 78728 **Current Mailing Address: New Mailing Address:** 2400 GRAND AVENUE PARKWAY, SUITE 103 AUSTIN, TX 78728 FEI Number: 74-2992654 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: (X) Change ( ) Addition Name: STILLER, KARL H Name: WAUGH, BRADLEY 2400 GRAND AVENUE PARKWAY, SUITE 103 2400 GRAND AVENUE PARKWAY, SUITE 103 Address: Address: City-St-Zip: AUSTIN, TX 78728 City-St-Zip: AUSTIN TX 78728 VΡ Title: Title: ( ) Delete (X) Change ( ) Addition LOPEZ-BARTOLOME, JAVIER SOISSON, JEFF Name: Name: 2400 GRAND AVENUE PARKWAY, SUITE 103 2400 GRAND AVENUE PARKWAY, SUITE 103 Address: Address: AUSTIN, TX 78728 AUSTIN, TX 78728 City-St-Zip: City-St-Zip: ( ) Delete (X) Change ( ) Addition Title: Title: DF HEIDLOFF, ECKARD KOELL, BERND Name: Name: 2400 GRAND AVENUE PARKWAY, SUITE 103 2400 GRAND AVENUE PARKWAY, SUITE 103 Address: Address: City-St-Zip: AUSTIN, TX 78728 City-St-Zip: AUSTIN, TX 78728

I hereby certify that the information supplied with this filing does not qualify for the 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.

Title:

Name:

Address:

City-St-Zip:

SIGNATURE: BERND KOELL DF 02/06/2007

() Change () Addition