2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# F03000003912

Entity Name: SIEMENS DEMAG DELAVAL TURBOMACHINERY, INC.

Current Principal Place of Business:

840 NOTTINGHAM WAY
HAMILTON, NJ 08638

New Principal Place of Business:

Current Mailing Address:

%SIEMENS CORPORATION
170 WOOD AVENUE SOUTH
ISELIN, NJ US

New Mailing Address:

FEI Number: 25-1563806 **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: AS ( ) Delete
Name: GOTLIFFE, ALAN
Address: 170 WOOD AVE. SOUTH
City-St-Zip: ISELIN, NJ 08830

Title: P ( ) Delete
Name: EDWARDS, CHARLES J
Address: 16530 PENINUSULA STREET
City-St-Zip: HOUSTON, TX 77015

Title: VP ( ) Delete
Name: O'CARROLL, JERRY
Address: 840 NOTTINGHAM WAY
City-St-Zip: HAMILTON, NJ 08638

Title: D ( ) Delete
Name: VINKENFLUEGEL, JURGEN
Address: WOLFGANG REUTER PLATZ
City-St-Zip: DUISBURGH, GR 47015

Title: S ( ) Delete
Name: RANCK, CHRISTOPHER J
Address: 4400 ALAFAYA TRAIL
City-St-Zip: ORLANDO, FL 32826

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change ( ) Addition
Name: EDWARDS, CHARLES J
Address: 840 NOTTINGHAM WAY TTNN 01176
City-St-Zip: TRENTON, NJ 08638

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: ALAN GOTLIFFE AS 04/20/2009

Electronic Signature of Signing Officer or Director Date