

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000005676

FILED
Mar 28, 2011
Secretary of State

Entity Name: GE SUPERABRASIVES US, INC.

Current Principal Place of Business:

GE COMMERCIAL FINANCE RE
901 MAIN AVENUE
NORWALK, CT 06851

New Principal Place of Business:

GE CAPITAL
901 MAIN AVENUE
NORWALK, CT 06851

Current Mailing Address:

GE COMMERCIAL FINANCE RE
901 MAIN AVENUE
NORWALK, CT 06851

New Mailing Address:

GE CAPITAL
901 MAIN AVENUE
NORWALK, CT 06851

FEI Number: 14-1682465

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

OFFICERS AND DIRECTORS:

Title: PD
Name: ROWAN, MICHAEL G
Address: 901 MAIN AVENUE
City-St-Zip: NORWALK, CT 06851

Title: VPD
Name: BURGER, ALEC
Address: 901 MAIN AVENUE
City-St-Zip: NORWALK, CT 06851

Title: T
Name: CALVERT, DONALD
Address: 901 MAIN AVENUE
City-St-Zip: NORWALK, CT 06851

Title: VPS
Name: MANASSERI, JOSEPH A
Address: 1441 BROADWAY
City-St-Zip: NEW YORK, NY 10018

Title: VPAS
Name: BUCHANAN, MARK E
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211

Title: AS
Name: RODRIGUEZ, LUCY
Address: 901 MAIN AVENUE
City-St-Zip: NORWALK, CT 06851

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: LUCY RODRIGUEZ

AS

03/28/2011

Electronic Signature of Signing Officer or Director

Date