

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002267

FILED
Apr 16, 2009
Secretary of State

Entity Name: ANDRITZ HYDRO CORP.

Current Principal Place of Business:

10735 DAVID TAYLOR DR. STE. 500
CHARLOTTE, NC 28262

New Principal Place of Business:

Current Mailing Address:

1115 NORTHMEADOW PARKWAY
ROSWELL, GA 30076

New Mailing Address:

FEI Number: 13-3632405

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 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 () Delete
Name: STEPHEN, SCHMIDT
Address: 10735 DAVID TAYLOR DR. STE. 500
City-St-Zip: CHARLOTTE, NC 28262

Title: P () Delete
Name: CARLOS, TORRES
Address: 10735 DAVID TAYLOR DR. STE. 500
City-St-Zip: CHARLOTTE, NC 28262

Title: T () Delete
Name: JOHN, MORPHIS
Address: 101 RIDGE STREET
City-St-Zip: GLENS FALLS, NY 12801

Title: SECR () Delete
Name: DAVID, BUMSTED
Address: 1115 NORTHMEADOW PARKWAY
City-St-Zip: ROSWELL, GA 30076

Title: AS () Delete
Name: DEBORAH, ZINK
Address: 1115 NORTHMEADOW PARKWAY
City-St-Zip: ROSWELL, GA 30076

Title: CEO () Delete
Name: MICHAEL, KOMBOECK
Address: PENZINGER STRASSE 76
City-St-Zip: WIEN, AU 1141 AU

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: JOHN, MORPHIS
Address: 1 NAMIC PLACE
City-St-Zip: GLENS FALLS, NY 12801

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: DEBORAH B. ZINK

MRS.

04/16/2009

Electronic Signature of Signing Officer or Director

_____ Date