

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000002226

FILED
Apr 12, 2011
Secretary of State

Entity Name: KOCH MEMBRANE SYSTEMS, INC.

Current Principal Place of Business:

850 MAIN STREET
WILMINGTON, MA 01887

New Principal Place of Business:

4111 E. 37TH STREET NORTH
WICHITA, KS 67220 US

Current Mailing Address:

4111 E. 37TH STREET NORTH
WICHITA, KS 67220

New Mailing Address:

4111 E. 37TH STREET NORTH
WICHITA, KS 67220 US

FEI Number: 22-3011666

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: PDIR
Name: KOCH, DAVID H
Address: 4111 E. 37TH STREET NORTH
City-St-Zip: WICHITA, KS 67220 US

Title: DIR
Name: DIFULGENTIZ, ROBERT A
Address: 4111 E. 37TH STREET NORTH
City-St-Zip: WICHITA, KS 67220 US

Title: VP
Name: ELSON, IAN H
Address: 4111 E. 37TH STREET NORTH
City-St-Zip: WICHITA, KS 67220 US

Title: TREA
Name: HERNANDEZ, JEANNE R
Address: 4111 E. 37TH STREET NORTH
City-St-Zip: WICHITA, KS 67220 US

Title: AS
Name: MOYNIHAN, PHILIP M
Address: 4111 E. 37TH STREET NORTH
City-St-Zip: WICHITA, KS 67220 US

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: MANDELINE HENDRICKS

POA

04/12/2011

Electronic Signature of Signing Officer or Director

Date