

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000004506

FILED
Apr 08, 2010
Secretary of State

Entity Name: ARVINMERITOR, INC.

Current Principal Place of Business:

2135 WEST MAPLE RD.
TROY, MI 480847186

New Principal Place of Business:

Current Mailing Address:

2135 WEST MAPLE RD.
TROY, MI 480847186

New Mailing Address:

FEI Number: 52-2092391

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: PD
Name: BAKER, VERNON G II
Address: 2135 WEST MAPLE
City-St-Zip: TROY, MI 48084

Title: VPSD
Name: CRABLE, JOHN A
Address: 2135 W MAPLE RD
City-St-Zip: TROY, MI 48084

Title: VPDS
Name: NOVAK, BARBARA
Address: 2135 W. MAPLE RD
City-St-Zip: TROY, MI 48084

Title: AT
Name: SCHMITTER, CRAIG
Address: 2135 W MAPLE RD
City-St-Zip: TROY, MI 48084

Title: VPT
Name: LEHMANN, MARY
Address: 2135 W MAPLE RD
City-St-Zip: TROY, MI 48084

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: CRAIG SCHMITTER

AT

04/08/2010

Electronic Signature of Signing Officer or Director

Date