

2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Jul 16, 2009
Secretary of State**

DOCUMENT# F98000003386

Entity Name: GE BETZ, INC.

Current Principal Place of Business:

4636 SOMERTON ROAD
TREVOSE, PA 19053 US

New Principal Place of Business:

Current Mailing Address:

12 CORPORATE WOODS BLVD
SUITE 300
ALBANY, NY 12211 US

New Mailing Address:

FEI Number: 23-1503731 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: P () Delete
Name: HEINER
Address: 4636 SOMERTON ROAD
City-St-Zip: TREVOSE, PA 19053 US

Title: D () Delete
Name: GLEN
Address: 4636 SOMERTON ROAD
City-St-Zip: TREVOSE, PA 19053 US

Title: D () Delete
Name: GLYNN
Address: 4200 WILDWOOD PARKWAY
City-St-Zip: ATLANTA, GA 30339 US

Title: T () Delete
Name: JEANNE
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211 US

Title: V () Delete
Name: BARBARA
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MARKHOFF, HEINER
Address: 4636 SOMERTON ROAD
City-St-Zip: TREVOSE, PA 19053 US

Title: D (X) Change () Addition
Name: MESSINA, GLEN
Address: 4636 SOMERTON ROAD
City-St-Zip: TREVOSE, PA 19053 US

Title: D (X) Change () Addition
Name: KEY, GLYNN
Address: 4200 WILDWOOD PARKWAY
City-St-Zip: ATLANTA, GA 30339 US

Title: T (X) Change () Addition
Name: MURPHY, JEANNE
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211 US

Title: V (X) Change () Addition
Name: CAMERON, BARBARA
Address: 12 CORPORATE WOODS BLVD
City-St-Zip: ALBANY, NY 12211 US

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: BARBARA A CAMERON , VICEPRESIDENT

V

07/16/2009

Electronic Signature of Signing Officer or Director

Date