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Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P06992** **(2)**

1. Corporation Name
CROSBY VALVE INC.

Principal Place of Business	Mailing Address
2800 POST OAK BLVD #5701 HOUSTON TX 77056	C/O FMC CORPORATION 200 E. RANDOLPH DR. CHICAGO IL 60601-6436

3. Date Incorporated or Qualified: 08/06/1985	3a. Date of Last Report: 05/01/1996
4. FEI Number: 76-0042338	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt #, etc 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 Country 30

9. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE ______ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: V NAME: NETHERLAND, JOSEPH H. STREET ADDRESS: 1803 GEARS RD. CITY-ST-ZIP: HOUSTON TX 77067	☐ DELETE	1.1 TITLE: President 1.2 NAME: Ropp, David J. 1.3 STREET ADDRESS: 43 Kendrick St. 1.4 CITY-ST-ZIP: Wrentham, MA 02093	☐ Change ☒ Addition
TITLE: V/S NAME: PROHL, ROBERT C. STREET ADDRESS: 1803 GEARS RD. CITY-ST-ZIP: HOUSTON TX 77067	☐ DELETE	2.1 TITLE: Vice President 2.2 NAME: Wallace M. Lueders 2.3 STREET ADDRESS: 43 Kendrick St. 2.4 CITY-ST-ZIP: Wrentham, MA 02093	☐ Change ☐ Addition
TITLE: V NAME: POTTER, ROBERT L. STREET ADDRESS: 1803 GEARS RD. CITY-ST-ZIP: HOUSTON TX 77067	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: V/T NAME: HARMON, LEE STREET ADDRESS: 1803 GEARS RD. CITY-ST-ZIP: HOUSTON TX 77067	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: T NAME: ROGERS, JOHN E. STREET ADDRESS: 200 E. RANDOLPH DR. CITY-ST-ZIP: CHICAGO IL 60601	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE: T NAME: MCCLUSKEY, EUGENE M. STREET ADDRESS: 200 E. RANDOLPH DR. CITY-ST-ZIP: CHICAGO IL 60601	☒ DELETE	6.1 TITLE: Assistant Treasurer 6.2 NAME: Bakas, Peter 6.3 STREET ADDRESS: 200 E. Randolph Dr. 6.4 CITY-ST-ZIP: Chicago, IL 60601	☐ Change ☒ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John E. Rogers J. E. Rogers Asst. Treas. 1/17/97 312-861-6191

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/96)