

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 24, 2006 8:00 am
Secretary of State

02-24-2006 90003 005 ***150.00

DOCUMENT # P11691

1. Entity Name
HONEYWELL INTERNATIONAL INC.



Principal Place of Business
**101 COLUMBIA RD
P.O. BOX 1057 - TAX DEPT
MORRISTOWN, NJ 07962**

Mailing Address
**101 COLUMBIA RD
P.O. BOX 1057 - TAX DEPT
MORRISTOWN, NJ 07962**



02112006 No Chg-P CR2E034 (11/05)

4. FEI Number
22-2640650

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

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

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PCEO
COTE, DAVID M
101 COLUMBIA RD
MORRISTOWN, NJ 07962**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BETHUNE, GORDON M
1600 SMITH ST., HQS EO
HOUSTON, TX 77002**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SVCF
ANDERSON, DAVID J
101 COLUMBIA RD
MORRISTOWN, NJ 07962**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VPCS
LARKINS, THOMAS F
101 COLUMBIA RD
MORRISTOWN, NJ 07962**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SV
KREINDLER, PETER
101 COLUMBIA RD.
MORRISTOWN, NJ**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BECHERER, HANS W
ONE JOHN DEERE PLACE
MOLINE, IL 312658098**

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Paul H. Brownstein
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Assistant V.P. - Taxes

2/13/06

Date

Daytime Phone #

Paul H. Brownstein