2001 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 15, 2001 8:00 am DOCUMENT # P18910 Secretary of State 1. Entity Name **VOITH HYDRO, INC.** 02-15-2001 90035 009 ***150.00 Principal Place of Business Mailing Address VOITH HYDRO, INC. VOITH HYDRO, INC EAST BERLIN ROAD P O BOX 712 623342 YORK PA 17405-0712 YORK PA 17404 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 23-2427730 Not Applicable Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name___ CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code 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. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. 11. ☐ Change Addition Delete TITLE TITLE Director NAME NAME KORMANN, HERMUT Karl-Heinz Fessel STREET ADDRESS STREET ADDRESS D89522 HEIDENHELM Sankt Poeltener Strasse 43 CITY-ST-ZIP CITY-ST-ZIP WEST GERMANY Heidenheim, Germany ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME SCHIFFER, HANS-PETER STREET ADDRESS STREET ADDRESS D89522 HEIDENHELM CITY-ST-ZIP CITY-ST-ZIP WEST GERMANY ☐ Change ■ Addition TITLE ☐ Delete NAME NAME GARNER, E. MARK STREET ADDRESS STREET ADDRESS 760 E. BERLIN RD CITY-ST-ZIP CITY-ST-ZIP YORK PA 17404 ☐ Addition TITLE ☐ Change TITLE ☐ Delete NAME NAME HOUGHTON, WILLIAM J STREET ADDRESS STREET ADDRESS 760 E. BERLIN RD CITY-ST-ZIP CITY-ST-ZIP YORK PA 17404 ☐ Change ☐ Addition TITLE TITLE ☐ Delete NAME NAME BOER, RALF R. STREET ADDRESS STREET ADDRESS 777 E. WISCONSIN AVE CITY-ST-ZIP CITY-ST-7IP MILWAUKEE WI 53202 ☐ Addition Change TITLE Delete TITLE AS NAME HOENSTINE, CLIFFORD M NAME STREET ADDRESS STREET ADDRESS 760 E. BERLIN RD

13. I 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

YORK PA 17404.

CITY-ST-ZIP

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/31/2001

(717) 792-7000

Daytime Phone #

Clifford M. Hoenstine, Aget