

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90484 012 ***150.00

DOCUMENT # P33348 1. Entity Name EATON ETN OFFSHORE LTD. INC.					
Principal Place of Business THE GROSVENOR BUILDING 1040 WEST GEORGIA STREET, 15TH FLOOR VANCOUVER, B.C., CANADA V6E 4,			Mailing Address EATON CORPORATION 1111 SUPERIOR AVE - ATTN TAX DEPARTMENT CLEVELAND, OH 44114 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Eaton Corporation Suite, Apt. #, etc. 1111 Superior Ave., Attn: Tax Department			
City & State		City & State Cleveland, OH 44114			
Zip	Country	Zip	Country	4. FEI Number 34-1651098	
5. Certificate of Status Desired <input type="checkbox"/>				Chg-P CR2E034 (11/05)	
6. Name and Address of Current Registered Agent CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P PARMENTER, ROBERT E 1111 SUPERIOR AVE CLEVELAND, OH <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS FRANKLIN, EARL R. 1111 SUPERIOR AVENUE CLEVELAND, OH <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VT RAWOT, BILLIE K 1111 SUPERIOR AVENUE CLEVELAND, OH 44114 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V OTTO, DAVID O. 1111 SUPERIOR AVE. CLEVELAND, OH <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LANGS, J. M. 686 PARKDALE AVENUE N. HAMILTON, ON L8n5z4 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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: <i>E.R. Franklin</i>		E.R. Franklin V.P. & Secretary		Date April 25 2006 523.5000 <small>Daytime Phone #</small>	

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OK