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FILED
Apr 16 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P41149 (6)
1. Corporation Name
DANFOSS INC.

Principal Place of Business
2995 EASTROCK DRIVE
ROCKFORD IL 61109

Mailing Address
2995 EASTROCK DRIVE
ROCKFORD IL 61109

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/23/1992

4. FEI Number
36-2739256
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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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
NAME
STREET ADDRESS
CITY-ST-ZIP
PCD
JORGEN, CLAUSEN
STENLOKKE 35, DK 6400
SONDERBORD, DENMARK

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
HANSEN-DAMM, PETER
SKOVHOJ 54, HORUPHAV
SYDALS, DENMARK

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S
GANN, MICHAEL
6084 SORREL TREE ROAD
ROCKFORD IL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
AS
JORGENSEN, J. BO
JORUP KLINT 5, HORUPHAV
SYDALS, DENMARK

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
WILKINS, ROBERT
4280 BRGANZA STREET
MIAMI FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P
ERHARDT, JESSEN
2995 EASTROCK DR
ROCKFORD IL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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:

[Signature]

Michael C. Gann

4-8-98

(815) 398-2770

CR2E034 (10/97)