

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M00000001780

**Entity Name:** PENTAIR THERMAL MANAGEMENT LLC

**Current Principal Place of Business:**

307 CONSTITUTION DRIVE  
MENLO PARK, CA 94025

**FILED**  
**Apr 24, 2017**  
**Secretary of State**  
**CC8997712886**

**Current Mailing Address:**

5500 WAYZATA BLVD.  
SUITE 600  
MINNEAPOLIS, MN 55416 US

**FEI Number: 65-1007284**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE, FL 32301 US

*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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR, PRESIDENT  
Name WOZNIAK, BETH  
Address 5500 WAYZATA BLVD.  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title MGR  
Name JILEK, ANGELA D.  
Address 5500 WAYZATA BLVD.  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title MGR, TREASURER  
Name BORIN, MARK  
Address 5500 WAYZATA BLVD.  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title ASST. SECRETARY  
Name WHITUS, J. BRAD  
Address 5500 WAYZATA BLVD.  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title SECRETARY  
Name STOKES, JASON  
Address 5500 WAYZATA BLVD.  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title VP FINANCE  
Name ZAWOYSKI, SARA  
Address 5500 WAYZATA BLVD.  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

Title VP, ENGINEERING & QUALIFICATION  
Name SALDARRIAGA , GUSTAVO A  
Address 5500 WAYZATA BLVD.  
SUITE 600  
City-State-Zip: MINNEAPOLIS MN 55416

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JASON STOKES**

**SECRETARY**

**04/24/2017**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date