

**2016 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 816047

**FILED**  
**Apr 12, 2016**  
**Secretary of State**  
**CC1446662424**

**Entity Name:** HARDINGE INC.

**Current Principal Place of Business:**

ONE HARDINGE DRIVE  
ELMIRA, NY 14902

**Current Mailing Address:**

P O BOX 1507  
ELMIRA, NY 14902 US

**FEI Number:** 16-0470200

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 S. PINE ISLAND ROAD  
PLANTATION, FL 33324 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

**Officer/Director Detail :**

Title CEO, CHAIRMAN OF THE BOARD OF DIRECTORS  
Name SIMONS, RICHARD L  
Address 6089 CLUB 15 ROAD  
City-State-Zip: HECTOR NY 14841

Title SD  
Name HUNTER, PHILLIP J  
Address 81365 KINGSTON HEATH  
City-State-Zip: LAQUINTA CA 92253

Title V  
Name GAIO, EDWARD J  
Address 16 SHETHAR STREET  
City-State-Zip: HAMMONDSPORT NY 14840

Title PRESIDENT OF TURNING/MILLING  
Name LANGA, JAMES P  
Address 30 BUSH ROAD  
City-State-Zip: HORSEHEADS NY 14845

Title D  
Name QUAIN , MITCHELL I  
Address 1 BRISTOL ROAD  
City-State-Zip: MIDDLEBURY CT 06762

Title V  
Name TIFFT, DOUGLAS C  
Address 70 DURLAND AVENUE  
City-State-Zip: ELMIRA NY 14905

Title VP, CFO  
Name MALONE, DOUGLAS J  
Address 11 THORPE AVENUE  
City-State-Zip: HAMMONDSPORT NY 14840

Title DIRECTOR  
Name GREENLEE, DOUGLAS A  
Address 3012 ARBOR SQUARE DRIVE  
City-State-Zip: FREDERICK MD 21701

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*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 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** DOUGLAS TIFFT

**VICE-PRESIDENT**

**04/12/2016**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name PERROTTI, JOHN J  
Address 108 WATERFORD WAY  
City-State-Zip: FAIRPORT NY 14450

Title DIRECTOR  
Name TRIPENY, TONY R  
Address 10809 HIDDEN MEADOW TRAIL  
City-State-Zip: CORNING NY 14830

Title DIRECTOR  
Name LEPOFSKY, ROBERT J  
Address 70 WESTCLIFF ROAD  
City-State-Zip: WESTON MA 02493

Title DIRECTOR  
Name ROSENZWEIG, BENJAMIN LEE  
Address 79 WEST PACES FERRY ROAD  
City-State-Zip: ATLANTA GA 30305