

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 847843

**Entity Name:** ABB DE INC.**Current Principal Place of Business:**12040 REGENCY PARKWAY STE 200  
CARY, NC 27518**Current Mailing Address:**12040 REGENCY PARKWAY STE 200  
CARY, NC 27518 US**FEI Number:** 36-3100018**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM  
1200 SOUTH 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  
Name SCHEU, GREG  
Address 12040 REGENCY PARKWAY STE 200  
City-State-Zip: CARY NC 27518

Title SE  
Name ONUSCHECK, DAVID  
Address 12040 REGENCY PARKWAY STE 200  
City-State-Zip: CARY NC 27518

Title TR  
Name HAGMANN, DANIEL  
Address 12040 REGENCY PARKWAY STE 200  
City-State-Zip: CARY NC 27518

Title VP  
Name ONUSCHECK, DAVID DIRECTO  
Address 12040 REGENCY PARKWAY STE 200  
City-State-Zip: CARY NC 27518

Title CFO  
Name ALLDE, JAN  
Address 12040 REGENCY PARKWAY STE 200  
City-State-Zip: CARY NC 27518

Title VP  
Name GRAY, MICHAEL VICE PR  
Address 12040 REGENCY PARKWAY STE 200  
City-State-Zip: CARY NC 27518

Title VICE PRESIDENT & TREASURER  
Name HEALY , JOHN  
Address 12040 REGENCY PARKWAY STE 200  
City-State-Zip: CARY NC 27518

*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: MICHAEL GRAY****SENIOR VP TAX****04/06/2015**

Electronic Signature of Signing Officer/Director Detail

Date