

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000002326

FILED
Feb 05, 2015
Secretary of State
CC1359276589

Entity Name: JOHN BEAN TECHNOLOGIES CORPORATION

Current Principal Place of Business:

70 W. MADISON ST., STE 4400
CHICAGO, IL 60602

Current Mailing Address:

70 W. MADISON ST., STE 4400
CHICAGO, IL 60602

FEI Number: 91-1650317

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 AT
Name FALLON, GERALYN
Address 70 W. MADISON ST., STE 4400
City-State-Zip: CHICAGO IL 60602

Title S
Name MARVIN, JAMES
Address 70 W. MADISON ST., STE 4400
City-State-Zip: CHICAGO IL 60602

Title EVP
Name MONTAGUE, MARK
Address 70 W. MADISON ST., STE 4400
City-State-Zip: CHICAGO IL 60602

Title EVP
Name SMITH, STEVE
Address 70 W. MADISON ST., STE 4400
City-State-Zip: CHICAGO IL 60602

Title EVP, CFO
Name DECK, BRIAN A.
Address 70 W. MADISON ST., STE 4400
City-State-Zip: CHICAGO IL 60602

Title EVP
Name BURDAKIN, DAVID
Address 70 W. MADISON ST., STE 4400
City-State-Zip: CHICAGO IL 60602

Title DIRECTOR
Name DEVINE, MAURY C
Address 1219 35TH ST. NW
City-State-Zip: WASHINGTON DC 20007

Title DIRECTOR
Name DOHENY, EDWARD
Address 100 E. WISCONSIN AVE.
2790
City-State-Zip: MILWAUKEE WI 53202

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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: GERALYN FALLON

ASSISTANT TREASURER 02/05/2015

_____ Electronic Signature of Signing Officer/Director Detail

_____ Date

Officer/Director Detail Continued :

Title DIRECTOR
Name FELDMAN, ALAN
Address 1300 ARLINGTON HEIGHTS ROAD
City-State-Zip: ITASCA IL 60523

Title DIRECTOR
Name RINGLER, JAMES
Address 2835 MIAMI VILLAGE DR
City-State-Zip: MIAMISBURG OH 45342

Title TREASURER
Name PACKARD, GREGORY
Address 70 W. MADISON ST., STE 4400
City-State-Zip: CHICAGO IL 60602

Title DIRECTOR
Name GOODWIN, JAMES
Address 1415 W. 22ND STREET
1100
City-State-Zip: OAK BROOK IL 60091

Title DIRECTOR, PRESIDENT, CEO
Name GIACOMINI, THOMAS W.
Address 70 W. MADISON ST., SUITE 4400
City-State-Zip: CHICAGO IL 60602