

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002267

Entity Name: ANDRITZ HYDRO CORP.**Current Principal Place of Business:**10735 DAVID TAYLOR DR. STE. 500
CHARLOTTE, NC 28262**Current Mailing Address:**5405 WINDWARD PKWY
SUITE 100W
ALPHARETTA, GA 30004 US**FEI Number:** 13-3632405**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	CO-PRESIDENT
Name	SCHMIDT, STEPHEN
Address	10735 DAVID TAYLOR DR. STE. 500
City-State-Zip:	CHARLOTTE NC 28262

Title	TREASURER
Name	MORPHIS, JOHN E
Address	1 NAMIC PLACE
City-State-Zip:	GLENS FALLS NY 12801

Title	SECRETARY
Name	ZINK, DEBORAH B
Address	5405 WINDWARD PKWY SUITE 100W
City-State-Zip:	ALPHARETTA GA 30004

Title	DIRECTOR
Name	LENZIN, CHRISTIAN
Address	VIA DANIELE MANIN 16/18
City-State-Zip:	SCHIO VICENZA 36015

Title	CO-PRESIDENT
Name	TORRES, CARLOS
Address	10735 DAVID TAYLOR DR. STE. 500
City-State-Zip:	CHARLOTTE NC 28262

Title	SENIOR VICE PRESIDENT AND GROUP GENERAL COUNSEL
Name	BUMSTED, DAVID W
Address	5405 WINDWARD PKWY SUITE 100W
City-State-Zip:	ALPHARETTA GA 30004

Title	CHAIRMAN, BOARD OF DIRECTORS
Name	SEMPER, WOLFGANG
Address	LUNZERSTRASSE 78
City-State-Zip:	LINZ UPPER AUSTRIA 4031

Title	DIRECTOR
Name	SCHOEBERL, MARTIN
Address	EIBESBRUNNERGASSE 20
City-State-Zip:	VIENNA VIENNA 1120

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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: DEBORAH B ZINK**SECRETARY****04/29/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title DIRECTOR
Name RYAN, TIMOTHY J
Address 5405 WINDWARD PKWY
 SUITE 100W
City-State-Zip: ALPHARETTA GA 30004

Title DIRECTOR
Name SAUZE, FREDERIC
Address AV. CIUDAD INDUSTRIAL NO 977
City-State-Zip: MORELIA MICHOACAN 58200