

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F05000000045

**FILED**  
**Apr 19, 2022**  
**Secretary of State**  
**1963739853CC**

**Entity Name:** NALCO INDUSTRIAL OUTSOURCING COMPANY

**Current Principal Place of Business:**

1601 WEST DIEHL ROAD  
NAPERVILLE, IL 60563-1198

**Current Mailing Address:**

1601 WEST DIEHL ROAD  
NAPERVILLE, IL 60563-1198

**FEI Number:** 36-4344205

**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 VP, AND TREASURER  
Name CATHERINE, LOH  
Address 1601 WEST DIEHL ROAD  
City-State-Zip: NAPERVILLE IL 60563-1198

Title SECRETARY  
Name MURPHY, MICHAEL P  
Address 1601 WEST DIEHL ROAD  
City-State-Zip: NAPERVILLE IL 60563-1198

Title DIRECTOR, VP  
Name BULISCHECK, JEFFREY  
Address 1601 W. DIEHL ROAD  
City-State-Zip: NAPERVILLE IL 60563-1198

Title EXECUTIVE VP, DIRECTOR  
Name BROWN, DARRELL  
Address 1601 W. DIEHL ROAD  
City-State-Zip: NAPERVILLE IL 60563-1198

Title EVP - TAX  
Name STROBEL, THOMAS  
Address 1601 W. DIEHL ROAD  
City-State-Zip: NAPERVILLE IL 60563-1198

Title VP, GENERAL COUNSEL,  
SECRETARY  
Name MCCORMICK, MICHAEL C  
Address 1 ECOLAB PLACE  
City-State-Zip: ST. PAUL MN 55102

Title DIRECTOR, PRESIDENT  
Name FAIRBANKS-HENDERSON, VIVECA  
Address 1601 WEST DIEHL ROAD  
City-State-Zip: NAPERVILLE IL 60563

Title VP  
Name SANCHA, PEDRO  
Address 1 ECOLAB PLACE  
City-State-Zip: ST. PAUL MN 55102

*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 P. MURPHY

**ASST. SECRETARY**

**04/19/2022**

Electronic Signature of Signing Officer/Director Detail

Date