

2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F10000005438

Entity Name: FCX PERFORMANCE, INC.

Current Principal Place of Business:

ONE APPLIED PLAZA
CLEVELAND, OH 44115

Current Mailing Address:

ONE APPLIED PLAZA
CLEVELAND, OH 44115 US

FEI Number: 31-1644350

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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 DIRECTOR, CEO
Name SCHRIMSHER, NEIL A
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115

Title VICE PRESIDENT/CHIEF FINANCIAL OFFICER & TREASURER, DIRECTOR
Name WELLS, DAVID K
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115

Title VP
Name LORING, K. W.
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115

Title VP
Name MILLER, BRIAN
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115

Title VICE PRESIDENT/SECRETARY
Name BAUER, F. D.
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115

Title ASSISTANT TREASURER
Name MCELHANNON, S. S.
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115

Title PRESIDENT
Name HOFFNER, W. E.
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115

Title CORPORATE CONTROLLER
Name MACEY, C.
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115

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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: W. E. HOFFNER

PRESIDENT

04/26/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title ASSISTANT TREASURER
Name CIESLAK, R.
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115