

2024 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	SHAREHOLDER	Title	VICE PRESIDENT-CHIEF HUMAN RESOURCES OFFICER
Name	APPLIED INDUSTRIAL TECHNOLOGIES, INC.	Name	LORING, K. W.
Address	ONE APPLIED PLAZA	Address	ONE APPLIED PLAZA
City-State-Zip:	CLEVELAND OH 44115	City-State-Zip:	CLEVELAND OH 44115
Title	VICE PRESIDENT-FINANCE, FCX	Title	CEO
Name	MILLER, BRIAN	Name	SCHRIMSHER, NEIL A.
Address	ONE APPLIED PLAZA	Address	ONE APPLIED PLAZA
City-State-Zip:	CLEVELAND OH 44115	City-State-Zip:	CLEVELAND OH 44115
Title	VICE PRESIDENT/CHIEF FINANCIAL OFFICER & TREASURER	Title	PRESIDENT
Name	WELLS, DAVID K.	Name	HOFFNER, W. E.
Address	ONE APPLIED PLAZA	Address	18 PROGRESS PARKWAY
City-State-Zip:	CLEVELAND OH 44115	City-State-Zip:	MARYLAND HEIGHTS MO 63043
Title	ASSISTANT TREASURER	Title	DIRECTOR
Name	CIESLAK, R.	Name	SCHRIMSHER, NEIL A.
Address	ONE APPLIED PLAZA	Address	ONE APPLIED PLAZA
City-State-Zip:	CLEVELAND OH 44115	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

04/11/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name WELLS, DAVID K.
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115

Title SECRETARY, DIRECTOR
Name PLOETZ, JON
Address ONE APPLIED PLAZA
City-State-Zip: CLEVELAND OH 44115