

2017 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F12000002111

Entity Name: ATI PRODUCTS, INC.**Current Principal Place of Business:**5100-H W.T.HARRIS BOULEVARD
CHALOTTE, AL**Current Mailing Address:**5100-H W.T.HARRIS BOULEVARD
CHARLOTTE, AL US**FEI Number: 56-0861646****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 ASST. SECRETARY, DIRECTOR
Name FARMER, BILLY J
Address 5100-H WEST W.T. HARRIS BLVD
City-State-Zip: CHARLOTTE AL

Title AS
Name RUBINO, MICHAEL
Address ONE JOHN DEERE PLACE
City-State-Zip: MOLINE IL 61265

Title VP
Name ROBERTS, MARK C
Address 1600 1ST AVENUE EAST
City-State-Zip: MILAN IL 61264

Title PCEO
Name MORGAN, TOMMY E
Address 1600 1ST AVENUE EAST
City-State-Zip: MILAN IL 61264

Title D
Name MORGAN, TOMMY E
Address 1600 1ST AVENUE EAST
City-State-Zip: MILAN IL 61264

Title SECRETARY
Name DAVIES, TODD E
Address ONE JOHN DEERE PLACE
City-State-Zip: MOLINE IL 61265

Title TREASURER
Name YATTONI, JOHN C
Address 1600 1ST AVENUE EAST
City-State-Zip: MILAN IL 61264

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 RUBINO**ASSISTANT SECRETARY 04/24/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date