

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F97000000403

**FILED**  
**Mar 03, 2023**  
**Secretary of State**  
**9816426996CC**

**Entity Name:** BOSCH REXROTH CORPORATION

**Current Principal Place of Business:**

5150 PRAIRIE STONE PARKWAY  
HOFFMAN ESTATES, IL 60192

**Current Mailing Address:**

1 TOWER LANE  
SUITE 3100  
OAKBROOK TERRACE, IL 60181 US

**FEI Number:** 23-1687400

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
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, EXECUTIVE VICE  
PRESIDENT, CHIEF FINANCIAL  
OFFICER, TREASURER  
Name KLEU, CHRISTOPH  
Address 5150 PRAIRIE STONE PARKWAY  
City-State-Zip: HOFFMAN ESTATES IL 60192

Title ASSISTANT TREASURER  
Name SCHAFFER, JON  
Address 5150 PRAIRIE STONE PARKWAY  
City-State-Zip: HOFFMAN ESTATES IL 60192

Title SECRETARY  
Name HOFFMAN, JANE  
Address 5150 PRAIRIE STONE PARKWAY  
City-State-Zip: HOFFMAN ESTATES IL 60192

Title DIRECTOR, CHIEF EXECUTIVE  
OFFICER, PRESIDENT  
Name GUMBS, GREGORY  
Address 5150 PRAIRIE STONE PARKWAY  
City-State-Zip: HOFFMAN ESTATES IL 60192

Title DIRECTOR  
Name ZIMMERMAN, CHRISTINE  
Address 38000 HILLS TECH DRIVE  
City-State-Zip: FARMINGTON HILSL MI 48331

Title CHAIR  
Name WUCHERER, MARC  
Address 5150 PRAIRIE STONE PARKWAY  
City-State-Zip: HOFFMAN ESTATES IL 60192

Title ASSISTANT TREASURER  
Name MCCANN, DEANNA  
Address 5150 PRAIRIE STONE PARKWAY  
City-State-Zip: HOFFMAN ESTATES IL 60192

Title DIRECTOR  
Name SCHMITT, MICHAEL  
Address 5150 PRAIRIE STONE PARKWAY  
City-State-Zip: HOFFMAN ESTATES IL 60192

**Continues on page 2**

*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:** JANE HOFFMAN

**SECRETARY**

**03/03/2023**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            DONATO, THOMAS  
Address        5150 PRAIRIE STONE PARKWAY  
City-State-Zip: HOFFMAN ESTATES IL 60192