

**2022 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F97000000403

**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           SECRETARY  
Name           HOFFMAN, JANE  
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           ASSISTANT TREASURER  
Name           SCHAFFER, JON  
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           CHAIR  
Name           WUCHERER, MARC  
Address        5150 PRAIRIE STONE PARKWAY  
City-State-Zip: HOFFMAN ESTATES IL 60192

*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:** JON SCHAFFER

**ASSISTANT TREASURER    04/19/2022**

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

\_\_\_\_\_  
Date