

2013 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000004010

Entity Name: MATERION BRUSH INC.**Current Principal Place of Business:**6070 PARKLAND BLVD
MAYFIELD HEIGHTS, OH 44124**Current Mailing Address:**6070 PARKLAND BLVD
MAYFIELD HEIGHTS, OH 44124 US**FEI Number:** 34-0119320**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 CD
Name HIPPLE, RJ
Address 7060 PARKLAND BLVD
City-State-Zip: MAYFIELD HEIGHTS OH 44124

Title VST
Name HASYCHAK, M C
Address 7060 PARKLAND BLVD.
City-State-Zip: MAYFIELD HEIGHTS OH 44124

Title D
Name GRAMPA, JOHN
Address 7060 PARKLAND BLVD.
City-State-Zip: MAYFIELD HEIGHTS OH 44124

Title VD
Name SKOCH, D A
Address 7060 PARKLAND BLVD
City-State-Zip: MAYFIELD HEIGHTS OH 44124

Title V
Name MAXWELL, WALTER G
Address 7060 PARKLAND BLVD.
City-State-Zip: MAYFIELD HEIGHTS, OH 44124

Title P
Name ANDERSON, MICHAEL D
Address 7060 PARKLAND BLVD
City-State-Zip: MAYFIELD HEIGHTS OH 44124

Title ASST. TREASURER & ASST.
SECRETARY
Name SCHIAVONI, GARY W
Address 6070 PARKLAND BLVD
City-State-Zip: MAYFIELD HEIGHTS OH 44124

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: GARY W. SCHIAVONI

ASST. TREASURER

04/09/2013

Electronic Signature of Signing Officer/Director Detail

Date