

2020 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F99000004389

Entity Name: SIEMENS GENERATION SERVICES COMPANY**Current Principal Place of Business:**3501 QUADRANGLE BLVD.
UNIVERSITY CORP CENTER ONE, STE 175
ORLANDO, FL 32817**Current Mailing Address:**3850 QUADRANGLE BLVD.
US TAX DEPT, MS AFS 466
ORLANDO, FL 32817 US**FEI Number:** 59-3594822**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
Name	ELLIS, LONNIE J
Address	170 WOOD AVENUE SOUTH
City-State-Zip:	ISELIN NJ 08830

Title	TREASURER, DIRECTOR
Name	HSU, YINTING
Address	3501 QUADRANGLE BLVD. UNIVERSITY CORP CENTER ONE, STE 175
City-State-Zip:	ORLANDO FL 32817

Title	VP
Name	JONES, ERIC
Address	3501 QUADRANGLE BLVD. UNIVERSITY CORP CENTER ONE, STE 175
City-State-Zip:	ORLANDO FL 32817

Title	PRESIDENT, DIRECTOR
Name	MCCORMICK, MICHAEL
Address	3501 QUADRANGLE BLVD. UNIVERSITY CORP CENTER ONE, STE 175
City-State-Zip:	ORLANDO FL 32817

Title	SECRETARY
Name	FLYNN, CHRISTOPHER
Address	3501 QUADRANGLE BLVD. UNIVERSITY CORP CENTER ONE, STE 175
City-State-Zip:	ORLANDO FL 32817

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: LONNIE J. ELLIS**ASST. SECRETARY****02/26/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date