

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P07211

**FILED**  
**Mar 16, 2015**  
**Secretary of State**  
**CC1593043596**

**Entity Name:** BARNES GROUP INC.

**Current Principal Place of Business:**

CORPORATE OFFICE  
123 MAIN STREET  
BRISTOL, CT 06010

**Current Mailing Address:**

CORPORATE OFFICE  
123 MAIN STREET  
BRISTOL, CT 06010 US

**FEI Number: 06-0247840**

**Certificate of Status Desired: No**

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 VP  
Name MARSHALL, GREGORY A  
Address 123 MAIN STREET  
City-State-Zip: BRISTOL CT 06010

Title CFO  
Name STEPHENS, CHRISTOPHER JJR.  
Address 123 MAIN ST  
City-State-Zip: BRISTOL CT 06010

Title SVHR  
Name EDWARDS, DAWN N  
Address 123 MAIN STREET  
City-State-Zip: BRISTOL CT 06010

Title PRESIDENT, CEO, AND DIRECTOR  
Name DEMPSEY, PATRICK J.  
Address CORPORATE OFFICE  
123 MAIN STREET  
City-State-Zip: BRISTOL CT 06010

Title VP  
Name HOPSON, KENNETH R.  
Address CORPORATE OFFICE  
123 MAIN STREET  
City-State-Zip: BRISTOL CT 06010

Title VP  
Name ACKER, MARIAN  
Address CORPORATE OFFICE  
123 MAIN STREET  
City-State-Zip: BRISTOL CT 06010

Title DIRECTOR  
Name BARNES, THOMAS O.  
Address CORPORATE OFFICE  
123 MAIN STREET  
City-State-Zip: BRISTOL CT 06010

Title DIRECTOR  
Name BENANAV, GARY G.  
Address 123 MAIN ST.  
City-State-Zip: BRISTOL CT 06010

**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: GREGORY A. MARSHALL**

**V.P., TAX**

**03/16/2015**

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

\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title DIRECTOR  
Name BRISTOW, WILLIAM S. JR.  
Address 123 MAIN ST.  
City-State-Zip: BRISTOL CT 06010

Title DIRECTOR  
Name MANGUM, MYLDRED H.  
Address 123 MAIN ST.  
City-State-Zip: BRISTOL CT 06010

Title DIRECTOR  
Name KRAMER, FRANCIS J.  
Address 123 MAIN ST.  
City-State-Zip: BRISTOL CT 06010

Title VP  
Name HOVORKA, LUKAS  
Address 123 MAIN ST.  
City-State-Zip: BRISTOL CT 06010

Title DIRECTOR  
Name SOHOVICH, JOANNA  
Address 123 MAIN ST.  
City-State-Zip: BRISTOL CT 06010

Title DIRECTOR  
Name MCCLELLAN, DR. HASSELL H. PHD  
Address 123 MAIN ST.  
City-State-Zip: BRISTOL CT 06010

Title DIRECTOR  
Name MORGAN, WILLIAM J.  
Address 123 MAIN ST.  
City-State-Zip: BRISTOL CT 06010

Title SR. VP  
Name BARNHART, RICK  
Address 169 KENNEDY RD.  
City-State-Zip: WINDSOR CT 06095

Title SR. V.P.  
Name MAYO, SCOTT A.  
Address 80 SCOTT SWAMP RD.  
City-State-Zip: FARMINGTON CT 06010