2014 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 843752

Entity Name: PALL CORPORATION

Current Principal Place of Business:

25 HARBOR PARK DRIVE PORT WASHINGTON, NY 11050

Current Mailing Address:

25 HARBOR PARK DRIVE PORT WASHINGTON. NY 11050

TOTAL WASHINGTON, THE FIGURE

FEI Number: 11-1541330 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

FILED Mar 18, 2014

Secretary of State

CC6830332645

Officer/Director Detail:

Title PRESIDENT, CHAIRMAN & CEO Title TREASURER

Name KINGSLEY, LAWRENCE Name JONES, R. BRENT

Address 25 HARBOR PARK DRIVE Address 25 HARBOR PARK DRIVE

City-State-Zip: PORT WASHINGTON NY 11050 City-State-Zip: PORT WASHINGTON NY 11050

Title GROUP VICE PRESIDENT Title GROUP VICE PRESIDENT

Name BARATELLI, YVES Name CHANDY, RUBY

Address 25 HARBOR PARK DRIVE Address 25 HARBOR PARK DRIVE

City-State-Zip: PORT WASHINGTON NY 11050 City-State-Zip: PORT WASHINGTON NY 11050

Title SECRETARY

Name BEHNIA, ROYA

Address 25 HARBOR PARK DRIVE

City-State-Zip: PORT WASHINGTON NY 11050

Title ASSISTANT SECRETARY

Name COLVIN, CATHLEEN

25 HARBOR PARK DRIVE

City-State-Zip: PORT WASHINGTON NY

City-State-Zip: PORT WASHINGTON NY 11050 City-State-Zip: PORT WASHINGTON NY

Title ASSISTANT SECRETARY Title ASSISTANT SECRETARY

Name MANDELBAUM, ADAM Name FINK, LAURA

Address 25 HARBOR PARK DRIVE Address 25 HARBOR PARK DRIVE

City-State-Zip: PORT WASHINGTON NY 11050 City-State-Zip: PORT WASHINGTON NY 11050

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: CATHLEEN COLVIN ASSISTANT SECRETARY 03/18/2014

Electronic Signature of Signing Officer/Director Detail

Date