

2020 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 US**FEI Number:** 11-1541330**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT 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 DIRECTOR, VP
Name LUTZ, ROBERT
Address 2200 PENNSYLVANIA AVE., NW SUITE 800W
City-State-Zip: WASHINGTON DC 20037

Title TREASURER
Name MCFADEN, FRANK
Address 2200 PENNSYLVANIA AVE., NW SUITE 800W
City-State-Zip: WASHINGTON DC 20037

Title VP
Name CORNELL, BRETT
Address 2200 PENNSYLVANIA AVE., NW SUITE 800W
City-State-Zip: WASHINGTON DC 20037

Title DIRECTOR, VP
Name MCFADEN, FRANK
Address 2200 PENNSYLVANIA AVE., NW SUITE 800W
City-State-Zip: WASHINGTON DC 20037

Title PRESIDENT
Name HONEYCUTT, JENNIFER
Address 25 HARBOR PARK DRIVE
City-State-Zip: PORT WASHINGTON NY 11050

Title VP, SECRETARY
Name O'REILLY, JAMES
Address 2200 PENNSYLVANIA AVE., NW SUITE 800W
City-State-Zip: WASHINGTON DC 20037

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: FRANK MCFADEN**TREASURER****05/31/2020**

Electronic Signature of Signing Officer/Director Detail

Date