## 2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# 843777

Entity Name: ANDRITZ INC.

# Current Principal Place of Business:

5405 WINDWARD PARKWAY SUITE 100W ALPHARETTA, GA 30004

# **Current Mailing Address:**

5405 WINDWARD PARKWAY SUITE 100W ALPHARETTA, GA 30004 US

# FEI Number: 14-1438713

## Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US Certificate of Status Desired: No

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

#### **Officer/Director Detail :**

Title	DIRECTOR	Title	DIRECTOR
Name	SCHOENBECK, JOACHIM	Name	KOEFLER, HUMBERT
Address	STATTEGGER STRASSE 18	Address	EIBESBRUNNERGASSE 20
City-State-Zip:	GRAZ STYRIA 8045	City-State-Zip:	VIENNA VIENNA 1120
Title	SENIOR VICE PRESIDENT AND GROUP GENERAL COUNSEL	Title Name	COMPLIANCE OFFICER ZINK, DEBORAH B
Name Address	BUMSTED, DAVID W 5405 WINDWARD PARKWAY	Address	5405 WINDWARD PARKWAY SUITE 100W
City-State-Zip:	SUITE 100W ALPHARETTA GA 30004	City-State-Zip:	ALPHARETTA GA 30004
T:41 -		Title	VP
Title	CHAIRMAN, BOARD OF DIRECTORS	Title Name	VP KARKARE, MILIND
Title Name Address	CHAIRMAN, BOARD OF DIRECTORS LEITNER, WOLFGANG STATTEGGER STRASSE 18		
Name	LEITNER, WOLFGANG	Name	KARKARE, MILIND 125 CLAIREMONT AVENUE SUITE 570
Name Address	LEITNER, WOLFGANG STATTEGGER STRASSE 18	Name Address	KARKARE, MILIND 125 CLAIREMONT AVENUE SUITE 570
Name Address City-State-Zip:	LEITNER, WOLFGANG STATTEGGER STRASSE 18 GRAZ 8045	Name Address City-State-Zip:	KARKARE, MILIND 125 CLAIREMONT AVENUE SUITE 570 DECATUR GA 30030
Name Address City-State-Zip: Title	LEITNER, WOLFGANG STATTEGGER STRASSE 18 GRAZ 8045 VP, FINANCE	Name Address City-State-Zip: Title	KARKARE, MILIND 125 CLAIREMONT AVENUE SUITE 570 DECATUR GA 30030 ASSISTANT TREASURER

#### 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: PHILLIP B. KENNEDY

SECRETARY

02/03/2021

Electronic Signature of Signing Officer/Director Detail

# FILED Feb 03, 2021 Secretary of State 0143384878CC

Date

## **Officer/Director Detail Continued :**

Title	ASSISTANT SECRETARY, VP, LEGAL	Title	SECRETARY
Name	O'BRIEN, VERONICA C	Name	KENNEDY, PHILLIP B
Address	5405 WINDWARD PARKWAY SUITE 100W	Address City-State-Zip:	14101 CAPITAL BLVD YOUNGSVILLE NC 27596
City-State-Zip:	ALPHARETTA GA 30004	ony-onate-zip.	TOUNGSVILLE INC 27350
Title	PRESIDENT	Title	DIRECTOR
Name	LUHRMANN, CARLTON L.	Name	STATON, MARK J.
Address	ONE NAMIC PLACE	Address	5405 WINDWARD PARKWAY SUITE 100W
City-State-Zip:	GLENS FALLS NY 12801	City-State-Zip:	ALPHARETTA GA 30004
Title	DIRECTOR	Title	SR. VP-HUMAN RESOURCES NORTH AMERICA
Name		Name	BLY, MICHAEL F.
Address City-State-Zip:	EIBESBRUNNERGASSE 20 VIENNA 1120	Address	5405 WINDWARD PARKWAY SUITE 100W
Title	VP-TAX	City-State-Zip:	ALPHARETTA FL 30004
Name	BEACH, SHANNON K.	Title	TREASURER
Address	14101 CAPITAL BOULEVARD	Name	SURAY, DONALD
City-State-Zip:	YOUNGSVILLE FL 27596	Address	5405 WINDWARD PARKWAY SUITE 100W
		City-State-Zip:	ALPHARETTA GA 30004