

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000003158

FILED
Mar 31, 2011
Secretary of State

Entity Name: ALFA LAVAL INC.

Current Principal Place of Business:

5400 INTERNATIONAL TRADE DRIVE
RICHMOND, VA 23231

New Principal Place of Business:

Current Mailing Address:

5400 INTERNATIONAL TRADE DRIVE
RICHMOND, VA 23231

New Mailing Address:

FEI Number: 13-1681631

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: PRES
Name: ATANASIO, JOHN C
Address: 5400 INTERNATIONAL TRADE DR.
City-St-Zip: RICHMOND, VA 23231 US

Title: VP
Name: PRATT, STEPHEN D
Address: 5400 INTERNATIONAL TRADE DR.
City-St-Zip: RICHMOND, VA 23231 US

Title: SEC
Name: CONNOLLY, WILLIAM J
Address: 5400 INTERNATIONAL TRADE DR.
City-St-Zip: RICHMOND, VA 23231 US

Title: TREA
Name: LAWRENCE, JOSEPH M
Address: 5400 INTERNATIONAL TRADE DR.
City-St-Zip: RICHMOND, VA 23231 US

Title: DIR
Name: LEIFLAND, PETER
Address: RUDEBOKSVAGEN 1
City-St-Zip: LUND, SWEDEN SE-226 55, NA SE-22655 SW

Title: DIR
Name: THURESSON, THOMAS
Address: RUDEBOKSVAGEN 1
City-St-Zip: LUND, SWEDEN SE-226 55, NA SE-22655 SW

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: STEPHEN D. PRATT

VP

03/31/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date