

2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F00000006440

FILED
Mar 04, 2015
Secretary of State
CC0134531186

Entity Name: OHIO WELDED COMPANY

Current Principal Place of Business:

3000 OAK PARK BLVD
HOUSTON, TX 77056

Current Mailing Address:

C/O TAX DEPT.
50 BEALE STREET
SAN FRANCISCO, CA 94105

FEI Number: 38-1810693

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T 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 PRES
Name FUTCHER, JOHN E
Address 3000 OAK PARK BLVD
City-State-Zip: HOUSTON TX 77056

Title SY
Name QUAZZO, MARY W
Address 50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title VP
Name DESHONG, JOHN K
Address 50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title TRES
Name LEADER, KEVIN C
Address 50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title AC
Name RESTIVO, PEGGY H
Address 50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title AS
Name SCHAFER, KIMBERLEY C
Address 50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title SVP & DIRECTOR
Name DAWSON, PETER A
Address 50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title SVP & DIRECTOR
Name BAILEY, MICHAEL C
Address C/O TAX DEPT.
 50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

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: PEGGY H. RESTIVO

ASST. CONTROLLER

03/04/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title PVP
Name KUXHAUSEN, STEVEN A
Address 3000 OAK PARK BLVD
City-State-Zip: HOUSTON TX 77056

Title VP
Name HAWKINS, STEPHEN
Address 3000 OAK PARK BLVD
City-State-Zip: HOUSTON TX 77056

Title AS
Name BROWER, DERECK R
Address 3000 OAK PARK BLVD
City-State-Zip: HOUSTON TX 77056

Title AT
Name MAHESHWARI, ANSHUL
Address C/O TAX DEPT.
50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title AC
Name BAKER, KIMBERLY
Address 50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title PVP & CONTROLLER
Name SPARKS, ANETTE M
Address C/O TAX DEPT.
50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title VP & AS
Name RANKIN, CLIFTON S
Address 3000 OAK PARK BLVD
City-State-Zip: HOUSTON TX 77056

Title AS
Name PERROU, ELDYNE S
Address C/O TAX DEPT.
50 BEALE STREET
City-State-Zip: SAN FRANCISCO CA 94105

Title VP
Name NICOLSON, JOHN E
Address 3000 POST OAK B LVD
City-State-Zip: HOUSTON TX 77056-6503