

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002122

FILED
Apr 18, 2011
Secretary of State

Entity Name: ITT WATER TECHNOLOGY, INC.

Current Principal Place of Business:

8200 N. AUSTIN AVENUE
MORTON GROVE, IL 60053 US

New Principal Place of Business:

Current Mailing Address:

C/O ITT CORPORATION
1133 WESTCHESTER AVENUE
WHITE PLAINS, NY 10604 US

New Mailing Address:

FEI Number: 03-0540058 **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: P
Name: NAPOLITANO, KEN
Address: 8200 N. AUSTIN AVENUE
City-St-Zip: MORTON GROVE, IL 60053

Title: VP/T
Name: PATEL, SHASHANK
Address: 666 E. DYER RD
City-St-Zip: SANTA ANA, CA 92706

Title: VP/S
Name: DOBSON, JANE
Address: 1133 WESTCHESTER AVENUE
City-St-Zip: WHITE PLAINS, NY 10604

Title: ATAS
Name: TZORTZATOS, MARIA
Address: 1133 WESTCHESTER AVENUE
City-St-Zip: WHITE PLAINS, NY 10604

Title: VP
Name: KELLY, DANIEL
Address: 1133 WESTCHESTER AVENUE
City-St-Zip: WHITE PLAINS, NY 10604

Title: VPAS
Name: CAREY, VINCENT
Address: 1133 WESTCHESTER AVENUE
City-St-Zip: WHITE PLAINS, NY 10604

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: MARIA TZORTZATOS

AS

04/18/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date