

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F07000005115

Entity Name: MAHLE CLEVITE INC.

FILED
Apr 07, 2008
Secretary of State

Current Principal Place of Business:

1350 EISENHOWER PLACE
ANN ARBOR, MI 48108

New Principal Place of Business:

Current Mailing Address:

41000 VINCENTI CT
NOVI, MI 48375

New Mailing Address:

FEI Number: 20-8331397

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LAUGENIO, MILTON
Address: MAHLE COMPONENTES DE MOTORES DO BRAZIL
City-St-Zip: ITAJUBA MG BRAZIL 37504 088,

Title: D (X) Delete
Name: PAULIK, RUDOLF DR.
Address: MAHLE GMBH PRAGSTRASSE 26 46 D 70376
City-St-Zip: STUTTGART GERMANY,

Title: P () Delete
Name: FRANZ, ARND
Address: 1350 EISENHOWER PLACE
City-St-Zip: ANN ARBOR, MI 48108

Title: S (X) Delete
Name: FOUTCH, WILLIAM O
Address: 830 W 1ST NORTH ST
City-St-Zip: MORRISTOWN, TN 37814

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FRANZ, ARND
Address: 1350 EISENHOWER PLACE
City-St-Zip: ANN ARBOR, MI 48108

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ARND FRANZ

D

04/07/2008

Electronic Signature of Signing Officer or Director

Date