

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003386

Entity Name: GE BETZ, INC.

FILED
Jan 11, 2005
Secretary of State

Current Principal Place of Business:

4636 SOMERTON ROAD
TREVOSSE, PA 19053 US

New Principal Place of Business:

Current Mailing Address:

ATTN: LOU-ANN RICCIO
187 DANBURY ROAD
WILTON, CT 06897 US

New Mailing Address:

FEI Number: 23-1503731 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: P () Delete
Name: OLIVER, GEORGE R
Address: 4636 SOMERTON ROAD
City-St-Zip: TREVOSSE, PA 19053 US

Title: VP () Delete
Name: CARUCCIO, ENERINO
Address: 4636 SOMERTON ROAD
City-St-Zip: TREVOSSE, PA 19053 US

Title: VP () Delete
Name: PANICHELLA, JOHN
Address: 4636 SOMERTON ROAD
City-St-Zip: TREVOSSE, PA 19053 US

Title: VP () Delete
Name: VAN OSCH, JOHN
Address: INTERLEUVENLAAN 25
City-St-Zip: HEVERLEE, BE 3001 BE

Title: SEC () Delete
Name: GOLDMAN, REBECCA W
Address: 4636 SOMERTON ROAD
City-St-Zip: TREVOSSE, PA 19053 US

Title: ASEC () Delete
Name: RICCIO, LOU-ANN
Address: 187 DANBURY ROAD
City-St-Zip: WILTON, CT 06897 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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

Title: () Change () Addition
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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 for the exemption stated in Section 119.07(3)(i), 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: LOU-ANN RICCIO

ASEC

01/11/2005

Electronic Signature of Signing Officer or Director

_____ Date