2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F98000003386

Entity Name: GE BETZ, INC.

FILED Jul 14, 2004 Secretary of State

Current Pri	ncipal Place o	of Business'		New Princi	pal Place of	Rusiness:		
	RTON ROAD	JS		THEW I IIII	par riace or	Dusiness.		
Current Mailing Address:				New Mailing Address:				
ATTN: KAREN DEANGELO 4636 SOMERTON ROAD TREVOSE, PA 19053 US			ATTN: LOU-ANN RICCIO 187 DANBURY ROAD WILTON, CT 06897 US					
FEI Number: 2	23-1503731	FEI Number Applied For ()	FEI Num	nber Not Appli	cable ()	Certificate	of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
1200 SOUT PLANTATIO	DRATION SYSTH PINE ISLANI DN, FL 33324		rpose of	f changing its	s reaistered a	office or regi	istered agent or both	
in the State			, росс с.		- rog.o.o.o.a		iotorou agent, er zotir,	
SIGNATUR		Signature of Registered Agent	<u> </u>			Da		
Election Cam		2)(b), F.S., the corporation did not r Trust Fund Contribution(). ORS:		•		TO OFFIC	ERS AND DIRECTORS	:
Title: Name: Address: City-St-Zip:	P () E OLIVER, GEORG 4636 SOMERTON TREVOSE, PA 1	N ROAD		Title: Name: Address: City-St-Zip:	()) Change()	Addition	
Title: Name: Address: City-St-Zip:	VP () E CARUCCIO, ENE 4636 SOMERTON TREVOSE, PA 1	N ROAD		Title: Name: Address: City-St-Zip:	()) Change()。	Addition	
Title: Name: Address: City-St-Zip:	VP () E PANICHELLA, JO 4636 SOMERTON TREVOSE, PA 1	N ROAD		Title: Name: Address: City-St-Zip:) Change()。	Addition	
Title: Name: Address: City-St-Zip:	VP () E VAN OSCH, JOHN INTERLEUVENLA HEVERLEE, BE	N IAN 25		Title: Name: Address: City-St-Zip:	()) Change()。	Addition	
Title: Name: Address: City-St-Zip:	VP () E BURTON, MICHA 4636 SOMERTON TREVOSE, PA 1	N ROAD		Title: Name: Address: City-St-Zip:	SEC (X GOLDMAN, RE 4636 SOMERT TREVOSE, PA	ON ROAD	Addition	
Title: Name: Address: City-St-Zip:	VP () E SABOL, COLIN 4636 SOMERTON TREVOSE, PA 1			Title: Name: Address: City-St-Zip:	ASEC (X RICCIO, LOU-A 187 DANBURY WILTON, CT 0	ROAD	Addition	

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 07/14/2004