

1.) CORPORATION NAME: **STEWART WARNER CORPORATION** DUE DATE: **12/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **REGISTERED AGENT SOLUTIONS INC** SCC ID NO: **00102285**

7288 HANOVER GREEN DR
MECHANICSVILLE, VA 23111

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:
HANOVER COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:
VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 33 COMMERCIAL ST B52-S1
CITY/ST/ZIP: FOXBORO, MA 02035

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: JAY EHLE		
TITLE: P/S		
ADDRESS: 33 COMMERCIAL STREET		
CITY/ST/ZIP/CO: FOXBORO, MA 02035		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: KEVIN C SMITH		
TITLE: VICE PRESIDENT		
ADDRESS: 33 COMMERCIAL STREET		
CITY/ST/ZIP/CO: FOXBORO, MA 02035		

	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: PATRICIA J TURNER		
TITLE: ASST SECRETARY		
ADDRESS: 735 POST ROAD EAST		
CITY/ST/ZIP/CO: WESTPORT, CT 06880		

	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: LEIGH ANN HERNANDEZ		
TITLE: DIRECTOR		
ADDRESS: 5601 GRANITE PARKWAY III		
CITY/ST/ZIP/CO: PLANO, TX 75024		

I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ PATRICIA J TURNER	PATRICIA J TURNER, ASST	11/12/2012
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	SECRETARY	DATE
	PRINTED NAME AND CORPORATE TITLE	

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.