

1.) CORPORATION NAME:

DUE DATE: **5/31/2014**

**OTIS ELEVATOR COMPANY**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

SCC ID NO: **F0007635**

**CT CORPORATION SYSTEM  
4701 COX ROAD, SUITE 285  
GLEN ALLEN, VA**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NJ**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 10 Farm Springs Road

CITY/ST/ZIP: Farmington, CT 06032-2568

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.

<p>NAME: Pedro Sainz de Baranda y Riva TITLE: PRESIDENT ADDRESS: 10 Farm Springs Road CITY/ST/ZIP/CO: Farmington, CT 06032-2568</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Nora LaFreniere TITLE: VP/GC/SECRETARY ADDRESS: 10 Farm Springs Road CITY/ST/ZIP/CO: Farmington, CT 06032-2568</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: Christopher Witzky TITLE: TREASURER ADDRESS: 10 Farm Springs Road CITY/ST/ZIP/CO: Farmington, CT 06032-2568</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: David M. Jones TITLE: ASST SECRETARY ADDRESS: 10 Farm Springs Road CITY/ST/ZIP/CO: Farmington, CT 06032-2568</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Ginny Oksun Kim TITLE: ASST SECRETARY ADDRESS: 10 Farm Springs Road CITY/ST/ZIP/CO: Farmington, CT 06032-2568</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: Bryan K. Pollard TITLE: ASST SECRETARY ADDRESS: 10 Farm Springs Road CITY/ST/ZIP/CO: Farmington, CT 06032-2568</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR

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/ David M. Jones	David M. Jones, ASST SECRETARY	4/21/2014
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE
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.		