

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213523889

1.) CORPORATION NAME:

EASTMAN KODAK COMPANY

DUE DATE: **6/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY
BANK OF AMERICA CENTER, 16TH FLOOR
1111 EAST MAIN STREET**

SCC ID NO: **F0189052**

5.) STOCK INFORMATION

CLASS AUTHORIZED

RICHMOND, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

NJ

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 343 STATE ST

CITY/ST/ZIP: ROCHESTER, NY 14650

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.

NAME: LAURA QUATELA
TITLE: PRESIDENT
ADDRESS: 343 STATE ST
CITY/ST/ZIP/CO: ROCHESTER, NY 14650

OFFICER DIRECTOR

NAME: DOUGLAS J. EDWARDS
TITLE: VICE PRESIDENT
ADDRESS: 343 STATE ST
CITY/ST/ZIP/CO: ROCHESTER, NY 14650

OFFICER DIRECTOR

NAME: MICHAEL A. KORIZNO
TITLE: VICE PRESIDENT
ADDRESS: 3003 SUMMIT BLVD, STE 1100
CITY/ST/ZIP/CO: ATLANTA, VA

OFFICER DIRECTOR

NAME: DOLORES K. KRUCHTEN
TITLE: VICE PRESIDENT
ADDRESS: 2600 MANITOU RD
CITY/ST/ZIP/CO: ROCHESTER, VA

OFFICER DIRECTOR

NAME: BRAD W. KRUCTEN
TITLE: SENIOR VP
ADDRESS: 343 STATE ST
CITY/ST/ZIP/CO: ROCHESTER, NY 14650

OFFICER DIRECTOR

NAME: TIMOTHY M. LYNCH
TITLE: VICE PRESIDENT
ADDRESS: 343 STATE ST
CITY/ST/ZIP/CO: ROCHESTER, VA

OFFICER DIRECTOR

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN O'GRADY VICE PRESIDENT 29 ROUTE DE PRE-BOIS , , FN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GUSTAVO OVIEDO VICE PRESIDENT 343 STATE ST ROCHESTER, VA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICK M. SELLER SENIOR VP 343 STATE ST ROCHESTER, NY 14650	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	TERRY R. TABER SENIOR VP 1999 LAKE AVE ROCHESTER, NY 14650	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KIM E. VANGELDER VICE PRESIDENT 343 STATE ST ROCHESTER, VA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	WILLIAM G. LOVE TREASURER 343 STATE ST ROCHESTER, NY 14650	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ANTONIO PEREZ CEO/CHAIRMAN 343 STATE ST ROCHESTER, NY 14650	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ERIC SAMUELS CONTROLLER 343 STATE ST ROCHESTER, VA	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PATRICK M. SELLER SECRETARY 343 STATE ST ROCHESTER, NY 14650	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SUSAN M. WYLIE ASST SECRETARY 343 STATE ST ROCHESTER, NY 14650	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	RICHARD S. BRADDOCK DIRECTOR 320 PARK AVE, 17TH FLOOR NEW YORK, NY 10022	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME:	TIMOTHY M. DONAHUE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	10128 HIGH HILL COURT		
CITY/ST/ZIP/CO:	GREAT FALLS, VA		
NAME:	MICHAEL HAWLEY	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	20 AMES ST		
CITY/ST/ZIP/CO:	CAMBRIDGE, VA		
NAME:	WILLIAM H. HERNANDEZ	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	ONE PPG PLACE		
CITY/ST/ZIP/CO:	PITTSBURGH, VA		
NAME:	DOUGLAS R. LEBDA	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	11115 RUSHMORE DR		
CITY/ST/ZIP/CO:	CHARLOTTE, VA		
NAME:	KYLE P. LEGG	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2 HOLLINS AVE		
CITY/ST/ZIP/CO:	BALTIMORE, MD 21210		
NAME:	DELANO E. LEWIS	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	7140 LAS VISTAS RD		
CITY/ST/ZIP/CO:	LAS CRUCES, VA		
NAME:	WILLIAM G. PARRETT	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	433 COUNTRY CLUB RD W		
CITY/ST/ZIP/CO:	NEW CANNAN, VA		
NAME:	JOEL SELIGMAN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	240 WALLIS HALL		
CITY/ST/ZIP/CO:	ROCHESTER, VA		
NAME:	DENNIS F. STRIGL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	ONE VERIZON WAY		
CITY/ST/ZIP/CO:	BASKING RIDGE, VA		
NAME:	Rebecca Roof	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	343 State Street		
CITY/ST/ZIP/CO:	Rochester, NY 14650		
NAME:	James V Continenza	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	17715 Kingbury Circle		
CITY/ST/ZIP/CO:	Lakeville, MN 55044		

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/ PATRICK M. SHELLER SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PATRICK M. SHELLER, SENIOR VP PRINTED NAME AND CORPORATE TITLE	5/21/2013 DATE
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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.