

1.) CORPORATION NAME:

**SIEMENS FOSSIL SERVICES INC.**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: **B.E. AUTH IN VI CT CORPORATION SYSTEM 4701 COX RD STE 301 GLEN ALLEN, VA 23060-6802**

DUE DATE: **12/31/2011**

SCC ID NO: **F1406893**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	1,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  
**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:  
**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 3504 LAKE LYNDIA DR  
LAUREL BLDG STE 390

CITY/ST/ZIP: ORLANDO, FL 32817-

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.

OFFICER       DIRECTOR

NAME: EDWARD F TAGGART  
TITLE: PRESIDENT  
ADDRESS: 3504 LAKE LYNDIA DRIVE  
LAUREL BLDG. SUITE 390  
CITY/ST/ZIP/CO: ORLANDO, FL 32817-

OFFICER       DIRECTOR

NAME: RUSSELL VOIGT  
TITLE: VICE PRESIDENT  
ADDRESS: 4400 ALAFAYA TRAIL  
Q1-113  
CITY/ST/ZIP/CO: ORLANDO, FL 32826-

OFFICER       DIRECTOR

NAME: ALAN GOTLIFFE  
TITLE: ASST SECRETARY  
ADDRESS: 170 WOOD AVENUE SOUTH  
CITY/ST/ZIP/CO: ISELIN, NJ 08830-

OFFICER       DIRECTOR

NAME: KAREN HARMS  
TITLE: ASST SECRETARY  
ADDRESS: 4400 ALAFAYA TRAIL  
Q1-475  
CITY/ST/ZIP/CO: ORLANDO, FL 32826-

OFFICER       DIRECTOR

NAME: NANCY R ORGAZ  
TITLE: ASST SECRETARY  
ADDRESS: 11950 CORPORATE BOULEVARD  
Q2-480  
CITY/ST/ZIP/CO: ORLANDO, VA 32826-

NAME: LOUIS M ZALTSBERG TITLE: TREASURER ADDRESS: 4400 ALAFAYA TRAIL Q1-480 CITY/ST/ZIP/CO: ORLANDO, FL 32826-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: DAVE S BRUBAKER TITLE: DIRECTOR ADDRESS: 4400 ALAFAYA TRAIL Q1-367 CITY/ST/ZIP/CO: ORLANDO, FL 32826-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: CRAIG A WEEKS TITLE: DIRECTOR ADDRESS: 4400 ALAFAYA TRAIL Q1-367 CITY/ST/ZIP/CO: ORLANDO, FL 32826-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR	
NAME: CHRIS FLYNN TITLE: SECRETARY ADDRESS: 4400 ALAFAYA TRAIL Q1-MC100 CITY/ST/ZIP/CO: ORLANDO, FL 32826-	<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/ ALAN GOTLIFFE SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	ALAN GOTLIFFE, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	11/16/2011 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.		