

SCC eFile

**2012 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

212520524

1.) CORPORATION NAME:

WOODWARD GOVERNOR COMPANY

DUE DATE: **5/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**NATIONAL REGISTERED AGENTS, INC.
4701 COX ROAD
SUITE 301**

SCC ID NO: **F1548116**

GLEN ALLEN, VA 23060-6802

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	150,000,000
PREFER	10,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1000 E DRAKE ROAD

CITY/ST/ZIP: FT COLLINS, CO 80525

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:	THOMAS A GENDRON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	P/CEO/CHM OF BD		
ADDRESS:	1000 EAST DRAKE ROAD		
CITY/ST/ZIP/CO:	FORT COLLINS, CO 80525		

NAME:	MARTIN V GLASS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRES-AIRFRAME		
ADDRESS:	7320 NORTH LINDER AVE		
CITY/ST/ZIP/CO:	SKOKIE, IL 60077		

NAME:	A CHRSTOPHER FAWZY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/GC/S/CCO		
ADDRESS:	1000 E DRAKE RD		
CITY/ST/ZIP/CO:	FORT COLLINS, CO 80525		

NAME:	ROBERT F WEBER JR	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	CFO/T		
ADDRESS:	1000 EAST DRAKE RD		
CITY/ST/ZIP/CO:	FOR COLLINS, CO 80525		

NAME:	JOHN A HALBROOK	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1000 EAST DRAKE RD		
CITY/ST/ZIP/CO:	FORT COLLINS, CO 80525		

NAME:	HARLAN G BARKLEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	5001 NORTH SECOND STREET		
CITY/ST/ZIP/CO:	LOVES PARK, IL 61111		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MATTHEW F TAYLOR VICE PRESIDENT 1000 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	STEVEN J MEYER VICE PRESIDENT 1000 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN D COHN DIRECTOR 1000 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	PAUL DONOVAN DIRECTOR 1000 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL H JOYCE DIRECTOR 1000 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MARY L PETROVICH DIRECTOR 1000 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LARRY E RITTENBERG DIRECTOR 1000 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES R RULSEH DIRECTOR 1000 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DR. RONALD M SEGA DIRECTOR 1000 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREGG C SENGSTACK DIRECTOR 1001 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	MICHAEL T YONKER DIRECTOR 1000 EAST DRAKE ROAD FORT COLLINS, CO 80525	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: GERHARD LAUFFER TITLE: PRES-ELEC PWR ADDRESS: HANDWERKSTRASSE 29 CITY/ST/ZIP/CO: STUTTGART, GERMAN 70565, DE	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
---	---	-----------------------------------

NAME: CHAD R PREISS TITLE: PRES-ENG SYS ADDRESS: 3800 NORTH WILSON AVENUE CITY/ST/ZIP/CO: LOVELAND, CO 80538	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
---	---	-----------------------------------

NAME: SAGAR A PATEL TITLE: P-AIRCFT TURBN ADDRESS: 5001 NORTH SECOND STREET CITY/ST/ZIP/CO: LOVES PARK, IL 61111	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
---	---	-----------------------------------

NAME: JAMES D RUDOLPH TITLE: P-IND TURBO M ADDRESS: 1000 EAST DRAKE ROAD CITY/ST/ZIP/CO: FORT COLLINS, CO 80525	<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/ ROBERT F WEBER JR	ROBERT F WEBER JR, CFO/T	5/31/2012
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.