

SCC eFile

2013 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION

213514687

1.) CORPORATION NAME:

ITT Water Technology, Inc.

DUE DATE: **4/30/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA**

SCC ID NO: **F1584723**

5.) STOCK INFORMATION

CLASS AUTHORIZED

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 1 Goulds Drive

CITY/ST/ZIP: Auburn, NY 10604

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:	KEN NAPOLITANO				
TITLE:	PRESIDENT				
ADDRESS:	8200 N AUSTIN AVENUE				
CITY/ST/ZIP/CO:	MORTON GROVE, IL 60053				

		<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME:	JANE DOBSON				
TITLE:	VP/SEC				
ADDRESS:	1133 WESTCHESTER AVENUE				
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	SULLY DERADDO				
TITLE:	VICE PRESIDENT				
ADDRESS:	1 GOULDS DRIVE				
CITY/ST/ZIP/CO:	AUBURN, NY 13021				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	CHRISTY DUANE				
TITLE:	VICE PRESIDENT				
ADDRESS:	8200 N. AUSTIN AVENUE				
CITY/ST/ZIP/CO:	MORTON GROVE, IL 60053				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	CHRIS JAMIESON				
TITLE:	VICE PRESIDENT				
ADDRESS:	8200 N. AUSTIN AVENUE				
CITY/ST/ZIP/CO:	MORTON GROVE, IL 60053				

		<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
NAME:	DANIEL KELLY				
TITLE:	VICE PRESIDENT				
ADDRESS:	1133 WESTCHESTER AVENUE				
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604				

NAME:	LINDA LYNCH	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2881 EAST BAYARD STREET		
CITY/ST/ZIP/CO:	SENECA FALLS, NY 13148		
NAME:	SHASHANK PATEL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP/TREAS/CO		
ADDRESS:	666 E. DYER RD		
CITY/ST/ZIP/CO:	SANTA ANA, CA 92706		
NAME:	KEITH RICHEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
NAME:	DON ROY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	8200 N. AUSTIN AVENUE		
CITY/ST/ZIP/CO:	MORTON GROVE, IL 60053		
NAME:	SCOTT SHIMER	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	8200 N. AUSTIN AVENUE		
CITY/ST/ZIP/CO:	MORTON GROVE, IL 60053		
NAME:	RAYMOND WILEY	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1 GOULDS DRIVE		
CITY/ST/ZIP/CO:	AUBURN, NY 13021		
NAME:	SONIA HOLLIES-BELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST. SEC		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
NAME:	ERICA FLORES	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
NAME:	KYLA SOLOMON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
NAME:	MICHAEL SPEETZEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1133 WESTCHESTER AVENUE		
CITY/ST/ZIP/CO:	WHITE PLAINS, NY 10604		
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/ ERICA FLORES	ERICA FLORES, ASST	3/25/2013	
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.			