

SCC eFile

**2014 ANNUAL REPORT  
COMMONWEALTH OF VIRGINIA  
STATE CORPORATION COMMISSION**

214525715

1.) CORPORATION NAME:

**Ellison Technologies, Inc.**

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

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CORPORATION SERVICE COMPANY  
Bank of America Center, 16th Floor  
1111 East Main Street**

SCC ID NO: **F1668385**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100,000

**RICHMOND, VA**

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**RICHMOND CITY**

4.) STATE OR COUNTRY OF INCORPORATION:

**DE**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 4630 WEAVER PKWY

CITY/ST/ZIP: WARRENVILLE, IL 60555

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:	JUNJI NAGANO	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	EXEC VP		
ADDRESS:	4630 WEAVER PKWY		
CITY/ST/ZIP/CO:	WARRENVILLE, IL 60555		

NAME:	MICHAEL B DAVIS	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP FIN/S		
ADDRESS:	4630 WEAVER PKWY		
CITY/ST/ZIP/CO:	WARRENVILLE, IL 60555		

NAME:	GRAHAM HOOPER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	9912 S PIONEER BLVD		
CITY/ST/ZIP/CO:	SANTA FE SPRINGS, CA 90670		

NAME:	AMY ODELL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	9912 S PIONEER BLVD		
CITY/ST/ZIP/CO:	SANTA FE SPRINGS, CA 90670		

NAME:	DONALD BASKIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	4630 WEAVER PARKWAY		
CITY/ST/ZIP/CO:	WARRENVILLE, IL 60555		

NAME:	MARK H MOHR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	2400 HUNTINGTON BLVD		
CITY/ST/ZIP/CO:	HOFFMAN ESTATES, IL 60192		

NAME: MASAHIKO MORI TITLE: DIRECTOR ADDRESS: 2-35-16 MEIEKI, NAKAMURA-KU CITY/ST/ZIP/CO: NAGOYA CITY, , JP	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: HITOSHI SAGARA TITLE: DIRECTOR ADDRESS: 200 PARK AVENUE CITY/ST/ZIP/CO: NEW YORK, NY 10166	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: THORSTEN SCHMIDT TITLE: DIRECTOR ADDRESS: D-33689 BIELEFELD CITY/ST/ZIP/CO: LOCAL COURT BIELEFELD , , DE	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: MASUNORI OGAWA TITLE: DIRECTOR ADDRESS: 200 PARK AVENUE CITY/ST/ZIP/CO: NEW YORK, NY 10166	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: KAZUHIRO NAGOYA TITLE: DIRECTOR ADDRESS: 2-1, OHTEMACHI, 1-CHOME CITY/ST/ZIP/CO: CHIYODA-KU, TOKYO, , JP	<input type="checkbox"/> OFFICER	<input checked="" 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/ MICHAEL B DAVIS SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	MICHAEL B DAVIS, VP FIN/S PRINTED NAME AND CORPORATE TITLE	5/17/2014 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.		