

1.) CORPORATION NAME:

ANDRITZ Environmental Solutions Inc.

DUE DATE: **7/31/2013**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

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

SCC ID NO: **F1831231**

RICHMOND, VA

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	100

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

RICHMOND CITY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 9730 Patuxent Woods Dr
Suite 100

CITY/ST/ZIP: Columbia, MD 21046

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:	Milas Ballard	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	9730 Patuxent Woods Dr		
CITY/ST/ZIP/CO:	Suite 100 Columbia, MD 21046		
NAME:	Deborah B Zink	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	1115 Northmeadow Pkwy		
CITY/ST/ZIP/CO:	Roswell, GA 30076-3857		
NAME:	Karl Hornhofer	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	Stattegger Strasse 18		
CITY/ST/ZIP/CO:	Graz, Styria 8045, AT		
NAME:	Klaus Baerenthaler	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	Waagner-Biro-Platz 1		
CITY/ST/ZIP/CO:	Raaba, Styria 8074, AT		
NAME:	Timothy J. Ryan	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1115 Northmeadow Pkwy		
CITY/ST/ZIP/CO:	Roswell, GA 30076-3857		
NAME:	Andreas Zechner	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	Waagner-Biro-Platz 1		
CITY/ST/ZIP/CO:	Raaba, Styria 8074, AT		

NAME: David W. Bumsted TITLE: VICE PRESIDENT ADDRESS: 1115 Northmeadow Pkwy CITY/ST/ZIP/CO: Roswell, GA 30076-3857	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: Donald Hug TITLE: VICE PRESIDENT ADDRESS: 9730 Patuxent Woods Dr Suite 100 CITY/ST/ZIP/CO: Columbia, MD 21046	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR	
NAME: John E. Morphis TITLE: TREASURER ADDRESS: One Namic Place CITY/ST/ZIP/CO: Glens Falls, NY 12801	<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/ Deborah B Zink	Deborah B Zink, SECRETARY	7/22/2013
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.		