

1.) CORPORATION NAME:

**CURTISS-WRIGHT FLOW CONTROL CORPORATION**

DUE DATE: **7/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM  
4701 COX RD STE 301  
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1866120**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMA	5,000
COMB	45

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

**HENRICO COUNTY**

4.) STATE OR COUNTRY OF INCORPORATION:

**NY**

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 2941 FAIRVIEW PARK DRIVE

CITY/ST/ZIP: FALLS CHURCH, VA 22042

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:	DAVID J. LINTON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2941 FAIRVIEW PARK DIRVE		
CITY/ST/ZIP/CO:	SUITE 850 FALLS CHURCH, VA 22042		
NAME:	MARTIN R. BENANTE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CHAIRMAN		
ADDRESS:	10 WATERVIEW BLVD		
CITY/ST/ZIP/CO:	PARSIPPANY, NJ 07054		
NAME:	MICHAEL J. DENTON	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	10 WATERVIEW BOULEVARD		
CITY/ST/ZIP/CO:	PARSIPPANY, NJ 07054		
NAME:	GLENN E. TYNAN	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	CFO		
ADDRESS:	10 WATERVIEW BLVD.		
CITY/ST/ZIP/CO:	PARSIPPANY, NJ 07054		
NAME:	GREGORY HEMPFLING	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VICE PRES		
ADDRESS:	1000 CHESWICK AVENUE		
CITY/ST/ZIP/CO:	CHESWICK, PA 15024		
NAME:	JAMES LEACHMAN	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	SR VICE PRES		
ADDRESS:	2950 BIRCH STREET		
CITY/ST/ZIP/CO:	BREA, CA 92821		

NAME:	DAVID CUNNINGHAM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1966E BROADHOLLOW RD		
CITY/ST/ZIP/CO:	FARMINGDALE, NY 11735		
NAME:	ANTHONY FABBO	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	1966E BROADHOLLOW RD		
CITY/ST/ZIP/CO:	FARMINGDALE, NY 11735		
NAME:	DONNA TANENBAUM	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2941 FAIRVIEW PARK DRIVE		
CITY/ST/ZIP/CO:	FALLS CHURCH, VA 22042		
NAME:	RON STOCKWELL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	2941 FAIRVIEW PARK DRIVE		
CITY/ST/ZIP/CO:	FALLS CHURCH , VA 22042		
NAME:	JEFF TARNOWSKI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	VP FINANCE		
ADDRESS:	10195 BRECKSVILLE		
CITY/ST/ZIP/CO:	BRECKSVILLE, OH 44141		
NAME:	HARRY JAKUBOWITZ	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	TREASURER		
ADDRESS:	10 WATERVIEW BLVD		
CITY/ST/ZIP/CO:	PARSIPPANY, NJ 07054		
NAME:	MARC S O'CASAL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST TREASURER		
ADDRESS:	10 WATERVIEW BLVD		
CITY/ST/ZIP/CO:	PARSIPPANY, NJ 07054		
NAME:	GEORGE P MCDONALD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	10 WATERVIEW BLVD		
CITY/ST/ZIP/CO:	PARSIPPANY, NJ 07054		
NAME:	MARK R BERENSON	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	10 WATERVIEW BLVD		
CITY/ST/ZIP/CO:	PARSIPPANY, NJ 07054		
NAME:	PAUL J FERDENZI	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	10 WATERVIEW BLVD		
CITY/ST/ZIP/CO:	PARSIPPANY, NJ 07054		
NAME:	DAVID P MAIVALD	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	ASST SECRETARY		
ADDRESS:	1000 CHESWICK AVENUE		
CITY/ST/ZIP/CO:	CHESWICK, PA 15024		

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.

<u>/s/ GEORGE P MCDONALD</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>GEORGE P MCDONALD, ASST SECRETARY</u> PRINTED NAME AND CORPORATE TITLE	<u>7/23/2012</u> DATE
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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.