



State of Rhode Island  
and Providence Plantations  
Office of the Secretary of State

A. Ralph Mollis, Secretary of State  
Corporations Division  
148 W. River Street  
Providence, RI 02904-2615  
401.222.3040

**PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009**

**Filing Period:** January 1 - March 1 • **Filing Fee:** \$50.00\* • **THIS REPORT MUST BE TYPED OR PRINTED LEGIBLY IN BLACK INK.**

\* In accordance with R.I.G.L. 7-1.2-1501(e), each corporation failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-1.2-1501(c&d)) is subject to a penalty fee of \$25.00.

1. Corporate ID No. 96637		2. Name of Corporation ArvinMeritor, Inc.			
3. Street Address Principal Business Office 2135 W. Maple Rd			City Troy	State MI	Zip 48084
4. Business Phone No. 248-435-1000		5. State of Incorporation Nevada			
6. Brief Description of the Character of Business Conducted in Rhode Island Manufacture and Sale of Automotive Components and Systems					
7. NAMES AND ADDRESSES OF THE OFFICERS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
President Name Vernon G. Baker, II			Vice President Name John A. Crable		
Street Address 2135 W. Maple Rd			Street Address 2135 W. Maple Rd		
City Troy	State MI	Zip 48084	City Troy	State MI	Zip 48084
Secretary Name Barbara Novak			Assistant Treasurer Name Craig Schmitter		
Street Address 2135 W. Maple Rd			Street Address 2135 W. Maple Rd		
City Troy	State MI	Zip 48084	City Troy	State MI	Zip 48084
8. NAMES AND ADDRESSES OF THE DIRECTORS: ("X" BOX FOR ATTACHMENT) <input type="checkbox"/> FILL IN SPACES BEFORE USING ATTACHMENTS					
Director Name Vernon G. Baker, II			Director Name John A. Crable		
Street Address 2135 W. Maple Rd			Street Address 2135 W. Maple Rd		
City Troy	State MI	Zip 48084	City Troy	State MI	Zip 48084
Director Name Barbara Novak			Director Name		
Street Address 2135 W. Maple Rd			Street Address		
City Troy	State MI	Zip 48084	City	State	Zip
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) <input type="checkbox"/>		
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet.			ISSUED SHARES — THIS SECTION <b>MUST</b> BE COMPLETED		
			Number of Shares	Class/Series	Par Value
			1	Common	\$1.00

This report must be executed on behalf of the corporation by an authorized representative. If the corporation is in the hands of a receiver or trustee, this report must be executed on behalf of the corporation by the receiver or trustee.

File Date	2-9-09
Check No.	214982
By:	MNC
FOR SECRETARY OF STATE USE ONLY	

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature	2-3-09
Date	
Craig Schmitter	
Print or Type Name	
Assistant Treasurer	
Title	