

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

401.222.3040

2009

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2009

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

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Corporate ID No. 42964	Emerson Netv	2. Name of Corporation Emerson Network Power, Energy Systems, N.A., Inc.				
Street Address Principal Busin 122 F Street	iess Office			ohio	44052	
4. Business Phone No (440) 683-4488 5. State of Incorporation Delaware						
Brief Description of the Chard Sales and Installation o	acter of Business Conducted f Telecommunications	in Rhode Island Equipment for Telecomn	nunication Service Providers	REFORE USING	ATTACHMENTS	
NAMES AND ADDRES resident Name Peter R. Loconto	SSES OF THE OFFICE	RS: ("X" BOX FOR ATTA	CHMENT) FILL IN SPACES Vice President Name David C. Moon			
Street Address 4350 Weaver Parkway			8000 West Florissant State Zip			
City Warrenville	State Illinois	60555	St. Louis	Missouri	63136	
Secretary Name Timothy G. Westmar	······		Treasurer Name Mark Pentz			
Street Address 8000 West Florissan			Street Address 1122 F Street		700	
Ctty	State	^{Zip} 63136	Cin Lorain	State Ohio	44052	
8. NAMES AND ADDRE	ESSES OF THE DIREC	rors: ("X" BOX FOR AT	TACHMENT) TILL IN SPACE	ES BEFORE USIF	NG AI JACHMEN 13	
Edward K. Feeney			R. Bruce Courtright Street Address			
Street Address 1050 Dearborn Drive			4350 Weaver Parkway	State	Zip	
City Columbus	State Ohio	43229	Warrenville	Illinois	60555	
Director Name Peter R. Loconto		••••	Director Name			
Street Address			Street Address			
4350 Weaver Parky	State	<i>Zip</i> 60555	City	State	Zip	
9. SHARES AUTHORIZED			10. SHARES ISSUED ("X" BOX FOR ATTACHMENT) ISSUED SHARES — THIS SECTION MUST BE COMPLETED			
			North and Charles	Class/Series	Par Value	
This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of			1000 Comm \$1 par valu	e Comm	\$1	
instruction sheet.				<u> </u>		
This report must be e	xecuted on behalf of th	le corporation by an author	rized representative. If the corpo er or trustee.	ration is in the ha	nds of a receiver or trusto	
this report must be ex	secuted on behalf of the	e corporation by the receiv	er or trustee.			
					I a I have a summined this	
			including any accompa	nying schedules and	rm that I have examined this I statements, and that all stat	
			contained herein are tru	e and correct.	alia La	
File Date	-23-09		://aumeen	nary		
20	199981		Signature	. ·	25410	
Check No			Maxine Shrontz			
	$\frac{1}{2}$			Print or Type Name		
By:	MMC	<u> </u>	Tax Analyst			