

## STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS Office of the Secretary of State - Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 ~ Email: corporations@sos.ri.gov ~ Website: www.sos.ri.gov

## PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2012

Filing Period: January 1 - March 1 - This report must be typed or printed legibly.

| ter of business   | s conducted in Rhode Island RESSES) ("X" BOX FOR A                           | City Livingston  5. State of Incorporation Michigan  d  TTACHMENT) Vice-President Name Robert J. Ingato Street Address 1 CIT Drive City Livingston Treasurer Name Glenn A. Votek Street Address | State<br>NJ   | Zip<br>07039   |  |
|---|--|---|---|--|--|
| State NJ  | Zip<br>07039   | Livingston  5. State of Incorporation Michigan  d  TIACHMENT) Vice-President Name Robert J. Ingato  Street Address 1 CIT Drive  City Livingston  Treasurer Name Glenn A. Votek  Street Address  | NJ<br>State   | <b>707039</b>  |  |
| State NJ  | Zip<br>07039   | Michigan  d  ITACHMENT)  Vice-President Name Robert J. Ingato Street Address 1 CIT Drive  City Livingston  Treasurer Name Glenn A. Votek  Street Address  | State   | Zip  |  |
| State NJ  | Zip<br>07039   | Vice-President Name Robert J. Ingato Street Address 1 CIT Drive City Livingston Treasurer Name Glenn A. Votek Street Address  |   | Zip  |  |
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| NJ<br> State  | 07039  | 1 CIT Drive City Livingston Treasurer Name Glenn A. Votek Street Address  |   |  |  |
| NJ<br> State  | 07039  | Treasurer Name Glenn A. Votek Street Address  |   |  |  |
|   |  | Glenn A. Votek Street Address   |   |  |  |
|   |  |   | Glenn A. Votek  |  |  |
|   |  | Street Address 1 CIT Drive  |   |  |  |
|   | Zip<br><b>07039</b>  | City<br><b>Livingston</b>   | State NJ  | Zip<br><b>07039</b>  |  |
| IES AND ADD   | RESSES) ("X" BOX FOR   |   |   |  |  |
|   |  | Director Name<br>Glenn A. Votek   |   | , 1,   |  |
| *****   |  | Street Address 1 CIT Drive  | × = 1.  |  |  |
| State<br>NJ   | Zip<br>07039   | City<br>Livingston  | State NJ  | Zip<br><b>07039</b>  |  |
|   |  | Director Name   | ·   |  |  |
|   |  | Street Address  |   |  |  |
| State   | Zip  | City  | State   | Zip  |  |
|   |  | 10. SHARES ISSUED (   | "X" BOX FOR ATTAC   | HMENT)   |  |
|   |  | NUMBER OF SHARES  | CLASS/SERIES  | PAR VALUE  |  |
| This information is currently of record in the Office of the Secretary of State. Changes require an additional filing.<br>See Section 9 of instruction sheet. |  | 100   | CWP   | \$1.00   |  |
| behalf of the   | corporation by an authorize  | ed representative. If the control the compression by the  | poration is in the hand   | s of a receiver or truste  |  |
|   | o. Do oxecutou on Denail Of  | Under penalty of perj   | ury, I declare and affir  | rm that I have examin  |  |
|   |  | and that all statemen   | ts contained herein a   | cnequies and statemore<br>re true and correct.   |  |
|   | #3307 <b>a.</b> -  | / Singul  | MUNICA  | 2/2  |  |
| USE ONLY  | FILE   | 2 To  | · · · · · · · · · · · · · · · · · · ·   | Ďate <sup>*</sup>  |  |
|   | MAR 1 6 2  | 012 rint or Type Name of  | Authorized Representa   | ative  |  |
|   | By Holot   | 129   |   |  |  |
|   | State NJ State record in the ditional filinget. behalf of the this report mu | State Zip 07039  State Zip  record in the Office of the Secretary ditional filing. Set.  behalf of the corporation by an authorize this report must be executed on behalf of MAR 1 6 2          | State Zip City Livingston Director Name  State Zip City NJ O7039  State Zip City Livingston Director Name  Street Address  State Zip City  10. SHARES ISSUED ( NUMBER OF SHARES  100  behalf of the corporation by an authorized representative. If the contains report must be executed on behalf of the corporation by the rectains report, including and that all statements  Under penalty of perithis report, including and that all statements  Signature of Authorize  Under M. Seufer | State Zip City State NJ Director Name  State NJ O7039 City Livingston NJ Director Name  Street Address 1 City State NJ Director Name  Street Address  State NJ Director Name  Street Address  State NJ Director Name  Street Address  State Tip City State  10. SHARES ISSUED ("X" BOX FOR ATTACK NUMBER OF SHARES CLASS/SERIES  100 CWP  Death of the corporation by an authorized representative. If the corporation is in the hand this report must be executed on behalf of the corporation by the receiver or trustee.  Under penalty of perjury, I declare and affit this report, including any accompanying sand that all statements contained herein a signature of Authorized Representative Linda M. Seufert  MAR 1 6 2012 Frint or Type Name of Authorized Representative |  |

## CIT TECHNOLOGIES CORPORATION Federal ID Number:

LOH 66443

## **BOARD OF DIRECTORS**

<u>Name</u> <u>Address</u>

Glenn A. Votek 1 CIT Drive, Livingston, NJ 07039

Eric S. Mandelbaum 1 CIT Drive, Livingston, NJ 07039

**OFFICERS** 

Name <u>Title</u> <u>Address</u>

Ron G. Arrington President 1 CIT Drive

Livingston, NJ 07039

Robert J. Ingato Executive Vice President 1 CIT Drive

Livingston, NJ 07039

Glenn A. Votek Executive Vice President 1 CIT Drive

& Treasurer Livingston, NJ 07039

Kathleen A. Nassaney Officer 1 CIT Drive

Livingston, NJ 07039

Eric S. Mandelbaum Senior Vice President & Secretary 1 CIT Drive

Livingston, NJ 07039

Linda M. Seufert Assistant Secretary 1 CIT Drive

Livingston, NJ 07039