

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

Fee: \$50.00

Division Of Business Services 148 W. River Street Providence RI 02904-2615 (401) 222-3040

# Limited Liability Company Annual Report

Filing Period: September 1 - November 1

In accordance with R.I.G.L. 7-16-66(d), each limited liability company failing or refusing to file its annual report within thirty (30) days after the time prescribed by law (R.I.G.L. 7-16-66(b&c)) is subject to a penalty fee of \$25.00.

**ANNUAL REPORT YEAR: 2015** 

**1. ID No.** 001053988

2. Exact Name of the Limited Liability Company Pentair Valves & Controls, LLC

3. State of Formation

State: TX

4. Brief Description of the Character of the Business Which is Actually Conducted in Rhode Island

**Engineered products** 

5. Principal Office Address

No. and Street: 10707 CLAY ROAD, SUITE 200

City or Town: HOUSTON State: TX Zip: 77041 Country: USA

6. Mailing Address of Limited Liability Company and Name or Title of Contact Person:

Contact Name: Contact Title:

No. and Street: 5500 WAYZATA BOULEVARD, SUITE 600

City or Town: MINNEAPOLIS State: MN Zip: 55416Country: USA

## 7. Name and Address of Each Manager of the Limited Liability Company, if Applicable. DO NOT LIST MEMBERS

Title	Individual Name	Address
	First, Middle, Last, Suffix	Address, City or Town, State, Zip Code, Country
MANAGER	MARK BORIN	5500 WAYZATA BLVD STE 600 MINNEAPOLIS, MN 55416 USA
MANAGER	ANGELA D JILEK	5500 WAYZATA BOULEVARD, SUITE 600 MINNEAPOLIS, MN 55416 USA
MANAGER	JOHN L STAUCH	5500 WAYZATA BOULEVARD, SUITE 600 MINNEAPOLIS, MN 55416 USA

#### Changes Require Filing of Form 642 - R.I.G.L. 7-16-11

9. This report must be executed by an authorized person pursuant to R.I.G.L. 7-16-66 (b).

**Signed this 5 Day of April, 2016 at 3:39:47 PM by the authorized person.** This electronic signature of the individual or individuals signing this instrument constitutes the affirmation or acknowledgement of the signatory, under penalties of perjury, that this instrument is that individual's act and deed or the act and deed of the company, and that the facts stated herein are true, as of the date of the electronic filing, in compliance with R.I. Gen. Laws § 7-16.

### By ANGELA D JILEK

Signature of Authorized Person

Form No. 632 Revised 09/07

© 2007 - 2016 State of Rhode Island and Providence Plantations All Rights Reserved