

2011 FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Apr 14, 2011
Secretary of State

Entity Name: CATERPILLAR LOGISTICS SERVICES, INC.

Current Principal Place of Business:

100 NE ADAMS STREET
PEORIA, IL 61629 US

New Principal Place of Business:

Current Mailing Address:

CATERPILLAR INC
100 NE ADAMS STREET, AB7310
PEORIA, IL 61629 US

New Mailing Address:

CATERPILLAR INC
100 NE ADAMS STREET, AB6490
PEORIA, IL 61629 US

FEI Number: 37-1209077

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: CPD
Name: LARSON, STEPHEN P
Address: 500 N. MORTON AVE.
City-St-Zip: MORTON, IL 61550

Title: VP
Name: SPELLMAN, DANIEL E
Address: 500 N. MORTON AVE.
City-St-Zip: MORTON, IL 61550

Title: T
Name: WEINGART, PHILLIP A
Address: 500 N. MORTON AVE.
City-St-Zip: MORTON, IL 61550

Title: VP
Name: SWEIKERT, ROBERT A
Address: 500 N. MORTON AVE.
City-St-Zip: MORTON, IL 61550

Title: D
Name: LEVENICK, STUART L
Address: 100 NE ADAMS ST
City-St-Zip: PEORIA, IL 61629

Title: AS
Name: HUXTABLE, LAURIE J
Address: 100 NE ADAMS ST
City-St-Zip: PEORIA, IL 61629

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LAURIE J. HUXTABLE

AS

04/14/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date