

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000278

Entity Name: ILS TECHNOLOGY LLC

FILED
Apr 04, 2006
Secretary of State

Current Principal Place of Business:

23000 EUCLID AVENUE
EUCLID, OH 44117

New Principal Place of Business:

Current Mailing Address:

23000 EUCLID AVENUE
EUCLID, OH 44117

New Mailing Address:

FEI Number: 34-1973058

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CRAWFORD, EDWARD F
Address: 23000 EUCLID AVE
City-St-Zip: EUCLID, OH 44117

Title: MGR () Delete
Name: VILSACK, ROBERT D
Address: 23000 EUCLID AVE
City-St-Zip: EUCLID, OH 44117

Title: MGR () Delete
Name: FOGARTY, PATRICK W
Address: 23000 EUCLID AVE
City-St-Zip: EUCLID, OH 44117

Title: MGR () Delete
Name: ELLIOTT, RICHARD P
Address: 23000 EUCLID AVE
City-St-Zip: EUCLID, OH 44117

Title: MGR () Delete
Name: POEPELMAN, ROBERT L
Address: 23000 EUCLID AVE
City-St-Zip: EUCLID, OH 44117

Title: MGR () Delete
Name: CESTARI, JOSEPH
Address: 23000 EUCLID AVE
City-St-Zip: EUCLID, OH 44117

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGR (X) Change () Addition
Name: CRAWFORD, MATTHEW V
Address: 23000 EUCLID AVE
City-St-Zip: EUCLID, OH 44117

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ROBERT D. VILSACK

MGR

04/04/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date