

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000001299

FILED  
Feb 23, 2006  
Secretary of State

Entity Name: SEARS PROMOTIONS, LLC

**Current Principal Place of Business:**

3333 BEVELRY RD.  
B2-130B  
HOFFMAN ESTATES, IL 60179

**New Principal Place of Business:**

**Current Mailing Address:**

3333 BEVELRY RD.  
B2-130B  
HOFFMAN ESTATES, IL 60179

**New Mailing Address:**

FEI Number: 36-1750680      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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CROW, KRIS  
Address: 3333 BEVERLY ROAD  
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: MGR (X) Delete  
Name: YUNG, JOHN  
Address: 3333 BEVERLY ROAD  
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: MGR (X) Delete  
Name: SCHNEIDER, PAMELA  
Address: 3333 BEVELRY RD.  
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: MGR (X) Delete  
Name: TRUSSELL, STEVEN  
Address: 3333 BEVERLY ROAD  
City-St-Zip: HOFFMAN ESTATES, IL 60179

**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:

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: KRIS CROW

MGR

02/23/2006

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