2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2007 8:00 am
Secretary of State
04-19-2007 90190 016 ***150.00

DOCUMENT # P15408

1. Entity Name
TRUE VALUE COMPANY

40069311

Principal Place of Business	Mailing Address
8600 W BRYN MAWR 8600 W. BRYN MAWR CHICAGO, IL 60631 US	8600 W BRYN MAWR CHICAGO, IL 60631 US

04122007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
36-2099896
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2007 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	SRVP
NAME	MAHURIN, STEVE
STREET ADDRESS	8600 W BRYN MAUR
CITY-ST-ZIP	CHICAGO, IL 60631
TITLE	V
NAME	JOHNSON, JON M
STREET ADDRESS	8600 W.BRYN.MAWR
CITY-ST-ZIP	CHICAGO, IL 60631
TITLE	VS
NAME	ANDERSON, CATHY
STREET ADDRESS	8600 W BRYN MAWR
CITY-ST-ZIP	CHICAGO, IL 60631
TITLE	VCIO
NAME	WEBBER, LESLIE
STREET ADDRESS	8600 W BRYN MAWR
CITY-ST-ZIP	CHICAGO, IL 60631
TITLE	PCEO
NAME	HEIDEMANN, LYLE G
STREET ADDRESS	8600 W BRYN MAWR
CITY-ST-ZIP	CHICAGO, IL 60631
TITLE	CFOV
NAME	SHADDUCK, DAVID A
STREET ADDRESS	8600 W BRYN MAWR
CITY-ST-ZIP	CHICAGO, IL 60631

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David Shadduck 4.18.07 7731955000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #