


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90061 026 ****50.00

DOCUMENT # M00000001044	
1. Entity Name WRIGHT LINE LLC	

Principal Place of Business 160 GOLD STAR BOULEVARD WORCESTER, MA 01606	Mailing Address 160 GOLD STAR BOULEVARD WORCESTER, MA 01606 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country

40051720



04212005 Chg-LLC CR2E083 (10/03)

4. FEI Number 03-0471268		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required		
6. Name and Address of Current Registered Agent C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

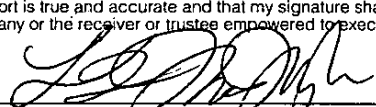
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by May 1, 2005	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM APW NORTH AMERICA INC. N22W23685 RIDGEVIEW PKWY WEST WAUKESHA, WI 531881013 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WRIGHTLINE HOLDING, INC 160 GOLD STAR BLVD WORCESTER, MA 01606 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GALLITANO, DAVID J N22 W23685 RIDGEVIEW PKWY WAUKESHA, WI 53188 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DAVID J. GALLITANO N22 W23685 RIDGEVIEW PKWY WEST WAUKESHA, WI 53188 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LEDERMAN, HOWARD N22 W23685 RIDGEVIEW PKWY WEST WAUKESHA, WI 531881013 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PHILIP RAYGRODITSKY 500 CAMPUS DRIVE, SUITE 220 FLORHAM PARK, NJ 07932 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GASICK, MICHAEL N22 W23685 RIDGEVIEW PKWY WEST WAUKESHA, WI 531881013 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WILLIAM T. ALLEN, III 333 SOUTH GRAND AVE, 28TH FLOOR LOS ANGELES, CA 90071 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MAHONEY, DENIS 160 GOLD STAR BLVD. WORCESTER, MA 01606 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LAWRENCE F. McHUGH 160 GOLDSTAR BLVD. WORCESTER, MA 01606 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FINK, PETER 160 GOLD STAR BLVD. WORCESTER, MA 01606 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JOSEPH H. WENDER 2121 AVENUE OF THE STARS, SUITE 2600 LOS ANGELES, CA 90067 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  **MANAGER** **4/27/05 508-852-4300**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #