

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M04000002020

**Entity Name:** PROFILE SYSTEMS, LLC

**Current Principal Place of Business:**

1000 EAST 80TH PLACE  
MERRILLVILLE, IN 46410

**Current Mailing Address:**

1000 EAST 80TH PLACE  
MERRILLVILLE, IN 46410 US

**FEI Number:** 35-1849077

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

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

*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

**Authorized Person(s) Detail :**

Title MGR  
Name PETERMAN, JOHN M  
Address 1000 EAST 80TH PLACE  
City-State-Zip: MERRILLVILLE IN 46410

Title MGR  
Name KACKOS, DENNIS E  
Address 1000 EAST 80TH PLACE  
City-State-Zip: MERRILLVILLE IN 46410

Title MGR  
Name BOWMAN, CAROL ANN  
Address 1000 EAST 80TH PLACE  
City-State-Zip: MERRILLVILLE IN 46410

Title MGR  
Name OESTERLE, RICAHRD C  
Address 138 SOUTH MAIN STE. 300  
City-State-Zip: CROWN POINT IN 46307

Title MGR  
Name HOWARD, JOHN  
Address 1000 EAST 80TH PLACE  
City-State-Zip: MERRILLVILLE IN 46410

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CAROL ANN BOWMAN

**MANAGER**

01/04/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date