

**2015 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# M12000006797

**Entity Name:** TITAN FORMWORK SYSTEMS, L.L.C.

**Current Principal Place of Business:**

7855 SOUTH RIVER PKWY, STE. 105  
TEMPE, AZ 85284

**Current Mailing Address:**

7855 SOUTH RIVER PKWY, STE. 105  
TEMPE, AZ 85284

**FEI Number:** 36-4246775

**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 MGRM  
Name THE HELCO COMPANIES, LLC  
Address 2075 FOX FIELD RD, STE. 102  
City-State-Zip: ST. CHARLES IL 60174

Title MGR  
Name PETTIBONE, LLC  
Address 2626 WARRENVILLE RD, STE. 300  
City-State-Zip: DOWNERS GROVE IL 60515

Title PRESIDENT  
Name BACON, DAVID L  
Address 8750 SOUTH COLLEGE LANE  
City-State-Zip: TEMPE AZ 85284

Title VP  
Name EYTCHISON, RANDALL D  
Address 8856 E. NORA CIRCLE  
City-State-Zip: MESA AZ 85207

Title ASST. SECRETARY  
Name DAVID , JACK L  
Address 4635 W. VILLA RITA DR  
City-State-Zip: GLENDALE AZ 85308

Title ASST. SECRETARY  
Name THOMAS, RICHARD A  
Address 42505 W. ARVADA LANE  
City-State-Zip: MARICOPA AZ 85138

Title VP  
Name SCHUSTER, RONALD W  
Address 28W341 FLANDERS LANE  
City-State-Zip: WINFIELD IL 60190

Title ASST. SECRETARY  
Name TAUSCHER, PAUL D  
Address 6 FLINTLOCK DR  
City-State-Zip: LONG VALLEY NJ 07853

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*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:** RICHARD A THOMAS

**CONTROLLER**

**05/29/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date

**Authorized Person(s) Detail Continued :**

Title VP  
Name MOORHOUSE, MICHAEL E  
Address 6905 N QUINCY AVE  
City-State-Zip: KANSAS CITY MO 64119

Title ASST. SECRETARY  
Name MARTIN, GERRY R  
Address 913 ASPEN DRIVE  
City-State-Zip: SMITHVILLE MO 64089

Title ASST. SECRETARY  
Name RADER, TOM  
Address 1210 E. PEDRO ROAD  
City-State-Zip: PHOENIX AZ 85042

Title ASST. SECRETARY  
Name CUBBAGE, BRIAN W  
Address 525 E LURAY AVENUE  
City-State-Zip: ALEXANDRIA VA 22301

Title ASST. SECRETARY  
Name MEADOWS, STANLEY H  
Address 538 HILLSIDE DRIVE  
City-State-Zip: HIGHLAND PARK IL 60035