

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 805459

FILED
Apr 20, 2012
Secretary of State

Entity Name: W.W. GRAINGER INC.

Current Principal Place of Business:

100 GRAINGER PKWY
TAX DEPT B3.E40
LAKE FOREST, IL 600455201 US

New Principal Place of Business:

Current Mailing Address:

100 GRAINGER PKWY
TAX DEPT B3.E40
LAKE FOREST, IL 600455201 US

New Mailing Address:

FEI Number: 36-1150280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

OFFICERS AND DIRECTORS:

Title: AS
Name: HOWARD, MICHAEL L
Address: 100 GRAINGER PKWY
City-St-Zip: LAKE FOREST, IL 600455201 US

Title: VP
Name: IRVING, GREGORY S
Address: 100 GRAINGER PKWY
City-St-Zip: LAKE FOREST, IL 600455201 US

Title: CFO
Name: JADIN, RONALD L
Address: 100 GRAINGER PKWY
City-St-Zip: LAKE FOREST, IL 600455201 US

Title: T
Name: WEST, PHILIP M
Address: 100 GRAINGER PARKWAY
City-St-Zip: LAKE FOREST, IL 600455201 US

Title: VP
Name: BROWN, LAURA
Address: 100 GRAINGER PKWY
City-St-Zip: LAKE FOREST, IL 600455201 US

Title: CEO
Name: RYAN, JAMES T
Address: 100 GRAINGER PKWY
City-St-Zip: LAKE FOREST, IL 600455201 US

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 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 above, or on an attachment with all other like empowered.

SIGNATURE: MICHAEL L HOWARD

AS

04/20/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date