


**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 08:00 A**  
**Secretary of State**

<b>DOCUMENT # F0100002011</b> 1. Entity Name LANCO INTERNATIONAL (OF ILLINOIS) INC.	
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Principal Place of Business 3111 WEST 167TH STREET HAZEL CREST, IL 60429	Mailing Address 3111 WEST 167TH STREET HAZEL CREST, IL 60429
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04242007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 36-2608826	Applied For Not Applicable
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5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

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IN THIS SPACE**

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 \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**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 NAME STREET ADDRESS CITY-ST-ZIP	D LANIGAN, JOHN J JR. 3111 WEST 167TH STREET HAZEL CREST, IL 60429
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LANIGAN, MICHAEL T 3111 WEST 167TH STREET HAZEL CREST, IL 60429
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD LANIGAN, WILLIAM P 3111 WEST 167TH STREET HAZEL CREST, IL 60429
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATAS BOQUIST, JOHN J 3111 WEST 167TH STREET HAZEL CREST, IL 60429
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ASAT BAYERS, STEPHEN J 3111 WEST 167TH STREET HAZEL CREST, IL 60429
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATAS LRKEN, EUGENE A JR 3111 WEST 167TH STREET HAZEL CREST, IL 60429

U00000749619  
05/18/07-80029-005 150.00

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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 empowerer.

SIGNATURE: Eugene A. Lrkens Jr Date: 4/25/07  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR