

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000004994

Entity Name: LAMB, LITTLE & CO.

FILED
Jan 14, 2009
Secretary of State

Current Principal Place of Business:

1101 PERIMETER DR
SUITE 500
SCHAUMBURG, IL 60173

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 59352
SUITE 500
SCHAUMBURG, IL 60173

New Mailing Address:

1101 PERIMETER DR
SUITE 500
SCHAUMBURG, IL 60173

FEI Number: 36-2081351

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CSVD () Delete
Name: MIGLIORE, VITO
Address: 1861 WILLIAMSBURG AVE.
City-St-Zip: GENEVA, IL 60184

Title: PD () Delete
Name: MCDONALD, BRIAN
Address: 4113 WYNDWOOD DRIVE
City-St-Zip: CRYSTAL LAKE, FL 60031

Title: VD () Delete
Name: LORENZINI, STEVEN
Address: 921 HUCKLEBERRY LANE
City-St-Zip: GLENVIEW, IL 60025 US

Title: VP () Delete
Name: DEMARCO, ANDREW
Address: 1263 LEEDS LANE
City-St-Zip: ELK GROVE VILLAGE, IL 60007

Title: VTD () Delete
Name: WAHLBORG, BRUCE
Address: 1303 LAKE SHORE DRIVE NORTH
City-St-Zip: BARRINGTON, IL 60010

Title: V () Delete
Name: HERMANN, LISA
Address: 698 HILL AVENUE
City-St-Zip: GLEN ELLYN, IL 60137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: LISA HERMANN

V

01/14/2009

Electronic Signature of Signing Officer or Director

Date