2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000000553

Entity Name: CHAMBERLAIN PROFESSIONAL PRODUCTS, INC.

FILED Apr 15, 2009 Secretary of State

Current Principal Place of Business:			New Principal Place of Business:		
6050 S. CC SUITE 180 TUCSON, .		3 ROAD			
Current Mailing Address:			New Mailing Address:		
845 LARCH AVE ELMHURST, IL 60126		US			
FEI Number: 11-3222256		FEI Number Applied For ()	FEI Number Not Appl	umber Not Applicable () Certificate of Status Desired ()	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:					
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND RD. PLANTATION, FL 33324 US					
The above in the State		submits this statement for the pur	rpose of changing i	its registered office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			t	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () ROLLS, J. DAVI 20992 LAUREL DEER PARK, IL	DRIVE	Title: Name: Address: City-St-Zip:	P (X) Change () Addition ROLLS, J. DAVID 2730 N. MILDRED AVENUE CHICAGO, IL 60614 US	
Title: Name: Address: City-St-Zip:	VCFO () FLANNERY, MK 521 WOOD RO OAK BROOK, IL	AD .	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () MARKWART, RO 5501 GROVESI ROLLING MEAD	DE LANE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP-S () TONE, MARK 1608 FAIRFAX OAKBROOK TE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VPT () O'CONNOR, CO 1315 SADDLEB BARTLETT, IL	ROOK	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ATAS () WONG, MARY 2233 KEIM ROA NAPERVILLE, II		Title: Name: Address: City-St-Zip:	()Change()Addition	

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: MARY WONG ATAS 04/15/2009