2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 27, 2008
Secretary of State

DOCUMENT# F97000006567

Entity Name: GWC CORP.

Current Principal Place of Business:

C/O RELATIONAL, LLC
3701 ALGONQUIN ROAD, STE. 600
ROLLING MEADOWS, IL 60008

New Principal Place of Business:

Current Mailing Address:

C/O RELATIONAL, LLC
3701 ALGONQUIN ROAD, STE. 600
ROLLING MEADOWS, IL 60008

New Mailing Address:

FEI Number: 36-4157782 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICES COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: CEOD ( ) Delete
Name: EHLERS, JEFFREY H
Address: 3701 ALGONQUIN ROAD, STE. 600
City-St-Zip: ROLLING MEADOWS, IL 60008

Title: SV ( ) Delete
Name: STACHULSKI, MARK E
Address: 3701 ALGONQUIN ROAD, STE. 600
City-St-Zip: ROLLING MEADOWS, IL 60008

Title: S ( ) Delete
Name: FRANKEL, DEAN A
Address: 3701 ALGONQUIN ROAD, STE. 600
City-St-Zip: ROLLING MEADOWS, IL 60008

Title: DV ( ) Delete
Name: STELLATO, JOHN
Address: 71 W. WACKER DRIVE, 47TH FLOOR
City-St-Zip: CHICAGO, IL 60606

Title: DV ( ) Delete
Name: HOPLAMAZIAN, MARK S
Address: 71 W. WACKER DRIVE, 47TH FLOOR
City-St-Zip: CHICAGO, IL 60606

Title: V ( ) Delete
Name: CZAJA, CHRISTOPHER M
Address: 3701 ALGONQUIN RD STE 660
City-St-Zip: ROLLING MEADOWS, IL 60008

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ( ) Change ( ) Addition
Name:
Address:
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: DEAN A FRANKEL S 05/27/2008

Electronic Signature of Signing Officer or Director Date