

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M01000000758

FILED  
May 01, 2009  
Secretary of State

Entity Name: INVENTORY LOCATOR SERVICE, LLC

**Current Principal Place of Business:**

1209 ORANGE STREET  
WILMINGTON, DE 19801

**New Principal Place of Business:**

**Current Mailing Address:**

100 NORTH RIVERSIDE PLAZA  
MC 5003-4027  
CHICAGO, IL 60606 US

**New Mailing Address:**

FEI Number: 52-2303505      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

**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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: LANGSEN, BRUCE  
Address: 3845 VISCOUNT STE 3  
City-St-Zip: MEMPHIS, TN 38118

Title: MGR ( ) Delete  
Name: COLLIER, JACQUELINE K  
Address: 2750 REGENT BLVD  
City-St-Zip: DALLAS, TX 75261

Title: MGR ( ) Delete  
Name: FULCHINO, PAUL E  
Address: 2750 REGENT BLVD  
City-St-Zip: DALLAS, TX 75261

Title: VPS ( ) Delete  
Name: JOHNSON, JAMES C  
Address: 100 NORTH RIVERSIDE PLAZA  
City-St-Zip: CHICAGO, IL 60606 US

Title: AVP ( ) Delete  
Name: WOLTER, CHRISTOPHER  
Address: 100 NORTH RIVERSIDE PLAZA  
City-St-Zip: CHICAGO, IL 60606 US

**ADDITIONS/CHANGES:**

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHRISTOPHER WOLTER

AT

05/01/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date