

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000221

FILED
Feb 08, 2008
Secretary of State

Entity Name: A&E FACTORY SERVICE, LLC

Current Principal Place of Business:

3333 BEVERLY ROAD
HOFFMAN ESTATES, IL 60179

New Principal Place of Business:

Current Mailing Address:

3333 BEVERLY ROAD
768 TAX, B2-130B
HOFFMAN ESTATES, IL 60179

New Mailing Address:

3333 BEVERLY ROAD
B2-130B
HOFFMAN ESTATES, IL 60179

FEI Number: 36-4486695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: GOOD, MARK
Address: 3333 BEVERLY ROAD
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: MGR () Delete
Name: WELKE, THOMAS F
Address: 3333 BEVERLY ROAD
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
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City-St-Zip:

Title: () Delete
Name:
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City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

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

Title: MGR (X) Change () Addition
Name: PIGOTT, JOHN
Address: 3333 BEVERLY ROAD
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: MGR () Change (X) Addition
Name: TRACH, JOAN
Address: 3333 BEVERLY ROAD
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: MGR () Change (X) Addition
Name: VANDERHOFF, ROBERT
Address: 3333 BEVERLY ROAD
City-St-Zip: HOFFMAN ESTATES, IL 60179

Title: MGR () Change (X) Addition
Name: NELSON, KATHY
Address: WHIRLPOOL / 2000 N M63
City-St-Zip: BENTON HARBOR, MI 49002

Title: MGR () Change (X) Addition
Name: CZANDERMA, KAREL
Address: WHIRLPOOL / 2000 N M63
City-St-Zip: BENTON HARBOR, MI 49002

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: MARK GOOD

MGR

02/08/2008

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