

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000000380

FILED
Mar 29, 2010
Secretary of State

Entity Name: TOTAL LOGISTIC CONTROL, LLC

Current Principal Place of Business:

10717 ADAMS ST, STE 200
HOLLAND, MI 49423

New Principal Place of Business:

Current Mailing Address:

ATTN CORP TAX
PO BOX 20
BOISE, ID 83726

New Mailing Address:

FEI Number: 36-4217230

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: MGRP
Name: WESTERMANN, PETER
Address: 10717 ADAMS ST, STE 200
City-St-Zip: HOLLAND, MI 49423

Title: V
Name: BORMAN, KAREN T
Address: 11840 VALLEY VIEW ROAD
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: V
Name: TROYER, DOYLE J
Address: 250 PARKCENTER BLVD
City-St-Zip: BOISE, ID 83706

Title: V/T
Name: BOYD, JOHN F
Address: 250 PARKCENTER BLVD
City-St-Zip: BOISE, ID 83706

Title: V/S
Name: BREEDLOVE, JOHN P
Address: 11840 VALLEY VIEW ROAD
City-St-Zip: EDEN PRAIRIE, MN 55344

Title: MGR
Name: BOEHNNEN, DAVID L
Address: 11840 VALLEY VIEW ROAD
City-St-Zip: EDEN PRAIRIE, MN 55344

I hereby 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: DOYLE J TROYER

V

03/29/2010

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