

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M03000000430

Entity Name: LTD CATALOG LLC

FILED
Mar 25, 2009
Secretary of State

Current Principal Place of Business:

2800 LAKESIDE DRIVE
BANNOCKBURN, IL 60015

New Principal Place of Business:

Current Mailing Address:

P O BOX 449
LINCOLNSHIRE, IL 60069

New Mailing Address:

FEI Number: 11-3675297

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: MGRM () Delete
Name: LEW LEIBOWITZ GP TRU, ST
Address: 1527 NORTHWOODS DRIVE
City-St-Zip: DEERFIELD, IL 60015

Title: MGRM () Delete
Name: TODD LEIBOWITZ GP TR, UST
Address: 1066 COURT AVENUE
City-St-Zip: HIGHLAND PARK, IL 60035

Title: MGRM () Delete
Name: DALE LEIBOWITZ GP TR, UST
Address: 1111 RUTLEDGE STREET
City-St-Zip: MADISON, MI 53703

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:

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: LEW LEIBOWITZ

MGRM

03/25/2009

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