

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000004286

FILED
Apr 18, 2012
Secretary of State

Entity Name: OWENS CORNING INSULATING SYSTEMS, LLC

Current Principal Place of Business:

ONE OWENS CORNING PARKWAY
TOLEDO, OH 43659

New Principal Place of Business:

Current Mailing Address:

ONE OWENS CORNING PARKWAY
TOLEDO, OH 43659

New Mailing Address:

FEI Number: 37-1525228

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
Name: LYONS, JONATHAN
Address: ONE OWENS CORNING PARKWAY
City-St-Zip: TOLEDO, OH 43659

Title: MGR
Name: DANA, CHARLES E
Address: ONE OWENS CORNING PARKWAY
City-St-Zip: TOLEDO, OH 43659

Title: P
Name: DANA, CHARLES E
Address: ONE OWENS CORNING PARKWAY
City-St-Zip: TOLEDO, OH 43659

Title: S
Name: CHRISTY, JOHN W
Address: ONE OWENS CORNING PARKWAY
City-St-Zip: TOLEDO, OH 43659

Title: T
Name: LYONS, JONATHAN
Address: ONE OWENS CORNING PARKWAY
City-St-Zip: TOLEDO, OH 43659

Title: VP
Name: MIKELONIS, JOSEPH J
Address: ONE OWENS CORNING PARKWAY
City-St-Zip: TOLEDO, OH 43659

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: JOSEPH J MIKELONIS

VP

04/18/2012

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