

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01347

FILED
Mar 23, 2011
Secretary of State

Entity Name: ALLIED TUBE & CONDUIT CORPORATION

Current Principal Place of Business:

16100 S. LATHROP AVENUE
HARVEY, IL 60426

New Principal Place of Business:

Current Mailing Address:

16100 S. LATHROP AVENUE
HARVEY, IL 60426

New Mailing Address:

FEI Number: 36-2425517

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. 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

OFFICERS AND DIRECTORS:

Title: PD
Name: CONNORS, NELDA JANIN
Address: 16100 S. LATHROP AVENUE
City-St-Zip: HARVEY, IL 60426

Title: SVPD
Name: DAVIS, JOHN
Address: 16100 S. LATHROP AVENUE
City-St-Zip: HARVEY, IL 60426

Title: DIR
Name: SCHMIDT, KARL
Address: 16100 S. LATHROP AVENUE
City-St-Zip: HARVEY, IL 60426

Title: VP
Name: KURASZ, EDWARD
Address: 16100 S. LATHROP AVENUE
City-St-Zip: HARVEY, IL 60426

Title: VP
Name: NUTSON, SUSAN
Address: 16100 S. LATHROP AVENUE
City-St-Zip: HARVEY, IL 60426

Title: VP
Name: HAYS, JAMES W
Address: 16100 S. LATHROP AVENUE
City-St-Zip: HARVEY, IL 60426

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANNE MEYER

POA

03/23/2011

Electronic Signature of Signing Officer or Director

Date