2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02016

Entity Name: TTX COMPANY/ACORN DIVISION

FILED Apr 02, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 101 NORTH WACKER DRIVE CHICAGO, IL 60606 **Current Mailing Address: New Mailing Address:** 101 NORTH WACKER DRIVE CHICAGO, IL 60606 FEI Number: 23-1554199 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 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 Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition REARDON, A F Name: Name: WELLS, THOMAS F 101 NORTH WACKER DRIVE 101 NORTH WACKER DRIVE Address: Address: City-St-Zip: CHICAGO, IL 60606 City-St-Zip: CHICAGO, IL 60606 Title: VΡ Title: () Delete (X) Change () Addition Name: BRALY, J.M. Name: LOFTUS, PATRICK B 101 NORTH WACKER DRIVE 101 NORTH WACKER DRIVE Address: Address: CHICAGO, IL 60606 CHICAGO, IL 60606 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition WELLS, T.F. CASEY, PATRICK J Name: Name: 101 NORTH WACKER DRIVE 101 NORTH WACKER DRIVE Address: Address: CHICAGO, IL 60606 City-St-Zip: CHICAGO, IL 60606 City-St-Zip: Title: () Delete Title: CFO (X) Change () Addition SAVARD, K.M. SAVARD, KATHLEEN M Name: Name: Address: 101 NORTH WACKER DRIVE Address: 101 NORTH WACKER DRIVE City-St-Zip: CHICAGO, IL 60606 City-St-Zip: CHICAGO, IL 60606 Title: Title: (X) Change () Addition () Delete LOFTUS, P.B. POWERS, BRIAN R Name: Name: 101 NORTH WACKER DRIVE Address: 101 NORTH WACKER DRIVE Address: City-St-Zip: CHICAGO, IL 60606 City-St-Zip: CHICAGO, IL 60606 () Delete Title: Title: (X) Change () Addition Name: KNIGHT, R M Name: KNIGHT, R. M. 1400 DOUGLAS ST 1400 DOUGLAS ST Address: Address: City-St-Zip: OMAHA, NE 68179 City-St-Zip: OMAHA, NE 68179

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 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 an address, with all other like empowered.

SIGNATURE: JOHN B. DAMIANI AVP 04/02/2009