

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02306

FILED
Mar 23, 2007
Secretary of State

Entity Name: TRANSCO PRODUCTS INC.

Current Principal Place of Business:

55 EAST JACKSON BLVD
SUITE 2100
CHICAGO, IL 60604

New Principal Place of Business:

Current Mailing Address:

55 EAST JACKSON BLVD
SUITE 2100
CHICAGO, IL 60604

New Mailing Address:

FEI Number: 36-3253440 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DR., STE. 4
WESTON, FL 33331 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: WOLBERT, EDWARD
Address: 55 E. JACKSON BLVD.
City-St-Zip: CHICAGO, IL 60604

Title: VP () Delete
Name: SMITH, ELLEN,
Address: 55 EAST JACKSON BLVD
City-St-Zip: CHICAGO, IL 60604

Title: D () Delete
Name: ANDERSON, CHARLES
Address: 55 E. JACKSON BLVD
City-St-Zip: CHICAGO, IL 60604

Title: D () Delete
Name: BERLINSKY, JAY S
Address: 375 BEECH ST
City-St-Zip: HIGHLAND PARK, IL 60035

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: ELLEN M SMITH

VP

03/23/2007

Electronic Signature of Signing Officer or Director

_____ Date