

**2018 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F06000004358

**FILED**  
**Apr 05, 2018**  
**Secretary of State**  
**CC5797122006**

**Entity Name:** DISTRIBUTORS HARDWARE INC.

**Current Principal Place of Business:**

8600 W. BRYN MAWR AVE.  
CHICAGO, IL 60631

**Current Mailing Address:**

8600 W. BRYN MAWR AVE.  
CHICAGO, IL 60631 US

**FEI Number: 01-0868106**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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

**Officer/Director Detail :**

Title DIRECTOR  
Name ANDERSON, CATHY C  
Address TRUSERV CORPORATION  
City-State-Zip: CHICAGO IL 60631-3505

Title CORPORATE SECRETARY  
Name ANDERSON, CATHY C  
Address TRUSERV CORPORATION  
City-State-Zip: CHICAGO IL 60631-3505

Title TREASURER  
Name WAGNER, BARBARA L.  
Address 8600 W. BRYN MAWR AVE.  
City-State-Zip: CHICAGO IL 60631

Title PRESIDENT  
Name LANE, ERIC J.  
Address 8600 W. BRYN MAWR AVE.  
City-State-Zip: CHICAGO IL 60631

Title DIRECTOR  
Name HARTMANN, JOHN R  
Address 8600 W. BRYN MAWR AVE.  
City-State-Zip: CHICAGO IL 60631

Title DIRECTOR  
Name WAGNER, BARBARA L.  
Address 8600 W. BRYN MAWR AVE.  
City-State-Zip: CHICAGO IL 60631

Title DIRECTOR  
Name O'CONNOR, DEBORAH A  
Address 8600 W. BRYN MAWR AVE.  
City-State-Zip: CHICAGO IL 60631

*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: BARBARA L. WAGNER**

**TREASURER**

**04/05/2018**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date