


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 23, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # F07000003887**  
 1. Entity Name  
**ADVANCED LUBRICANTS OF ILLINOIS, INC.**



Principal Place of Business      Mailing Address  
**800 ROOSEVELT RD E-300**      **800 ROOSEVELT RD E-300**  
**GLEN ELLYN, IL 60137**      **GLEN ELLYN, IL 60137**

**DO NOT WRITE IN THIS SPACE**



01152008    No Chg-P    CR2E034 (11/05)

4. FEI Number      Applied For  
**51-0488828**      Not Applicable

5. Certificate of Status Desired        **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**C T CORPORATION SYSTEM**  
**1200 SOUTH PINE ISLAND ROAD**  
**PLANTATION, FL 33324**

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.        **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	FREEDLUND, ROGERS P JR
STREET ADDRESS	800 ROOSEVELT RD E-300
CITY-ST-ZIP	GLEN ELLYN, IL 60137
TITLE	VCS
NAME	FISHER, WILLIAM G
STREET ADDRESS	800 ROOSEVELT RD E-300
CITY-ST-ZIP	GLEN ELLYN, IL 60137
TITLE	DT
NAME	SIMMONS, RIC
STREET ADDRESS	800 ROOSEVELT RD E-300
CITY-ST-ZIP	GLEN ELLYN, IL 60137
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

400000791956  
 01/23/08-80096-025 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Richard S. Simmons      1/20/08      630-790-6000  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #