

1.) CORPORATION NAME:

S & C Electric Company

DUE DATE: **5/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**CT CORPORATION SYSTEM
4701 COX RD STE 301
GLEN ALLEN, VA 23060-6802**

SCC ID NO: **F1824434**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	4,641,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

HENRICO COUNTY

4.) STATE OR COUNTRY OF INCORPORATION:

DE

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 6601 N. RIDGE BLVD

CITY/ST/ZIP: CHICAGO, IL 60626

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

<p>NAME: JOHN W ESTEY TITLE: P/CEO ADDRESS: 6601 N RIDGE BLVD CITY/ST/ZIP/CO: CHICAGO, IL 60626</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: STANLEY F SLABAS TITLE: VICE PRESIDENT ADDRESS: 6601 N RIDGE BLVD CITY/ST/ZIP/CO: CHICAGO, IL 60626</p>	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: JOHN E. JOHANN TITLE: TREASURER ADDRESS: 6601 N. RIDGE BLVD CITY/ST/ZIP/CO: CHICAGO, IL 60626</p>	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
<p>NAME: LYNN CONRAD ARMSTRONG TITLE: DIRECTOR ADDRESS: 6601 N RIDGE BLVD CITY/ST/ZIP/CO: CHICAGO, IL 60626</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: G. MICHAEL HORN TITLE: DIRECTOR ADDRESS: 6601 N. RIDGE BLVD CITY/ST/ZIP/CO: CHICAGO, IL 60626</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
<p>NAME: FRANK KELLY TITLE: DIRECTOR ADDRESS: 6601 N. RIDGE BLVD CITY/ST/ZIP/CO: CHICAGO, IL 60626</p>	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR

NAME: JOHN E. KIRKPATRICK TITLE: DIRECTOR ADDRESS: 6601 N. RIDGE BLVD CITY/ST/ZIP/CO: CHICAGO, IL 60613	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: ERLE NYE TITLE: DIRECTOR ADDRESS: 6601 N. RIDGE BLVD CITY/ST/ZIP/CO: CHICAGO, IL 60626	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
NAME: KYLE SEYMOUR TITLE: DIRECTOR ADDRESS: 6601 N. RIDGE BLVD CITY/ST/ZIP/CO: CHICAGO, IL 60626	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.				
/s/ JOHN E. JOHANN	JOHN E. JOHANN, TREASURER	7/2/2012		
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE		
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.				