

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 169744

FILED  
Feb 25, 2009  
Secretary of State

Entity Name: HADLEY & LYDEN INC.

## Current Principal Place of Business:

1960 HOWELL BRANCH RD  
P.O.BOX 700  
WINTER PARK, FL 32790

## New Principal Place of Business:

1960 HOWELL BRANCH RD  
WINTER PARK, FL 32792

## Current Mailing Address:

1960 HOWELL BRANCH RD  
P.O.BOX 700  
WINTER PARK, FL 32790

## New Mailing Address:

FEI Number: 59-0713365      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LYDEN, SCOTT A  
2040 VENETIAN WAY  
WINTER PARK, FL 32789      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: TD ( ) Delete  
Name: WECKERLE, MARTIN S.,  
Address: 4240 LANKMARK DR  
City-St-Zip: ORLANDO, FL

Title: PSD ( ) Delete  
Name: LYDEN, SCOTT A.,  
Address: 2040 VENETIAN WAY  
City-St-Zip: WINTER PARK, FL 32789

Title: VD ( ) Delete  
Name: LYDEN, JAMES P,  
Address: 1600 ALABAMA DR.,#401  
City-St-Zip: WINTER PARK, FL 32789

Title: V ( ) Delete  
Name: DEJONG, PATRICK  
Address: 1551 OAKHURST AVE.  
City-St-Zip: WINTER PARK, FL 32789

Title: V ( ) Delete  
Name: ALLEN, BRADLEY T  
Address: 160 SHELL POINT WEST  
City-St-Zip: MAITLAND, FL 32751

## 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:

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

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: MARTIN S. WECKERLE

TD

02/25/2009

Electronic Signature of Signing Officer or Director

Date