

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F02000002278

Entity Name: LANDIS+GYR INC.

FILED
Apr 30, 2008
Secretary of State

Current Principal Place of Business:

2800 DUNCAN ROAD
LAFAYETTE, IN 47904

New Principal Place of Business:

Current Mailing Address:

2800 DUNCAN ROAD
LAFAYETTE, IN 47904

New Mailing Address:

FEI Number: 03-0400907

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: PCEO () Delete
Name: MORA, RICHARD
Address: 2800 DUNCAN ROAD
City-St-Zip: LAFAYETTE, IN 47904

Title: VCFO () Delete
Name: SHIPLEY, DONALD
Address: 2800 DUNCAN ROAD
City-St-Zip: LAFAYETTE, IN 47904

Title: VPS () Delete
Name: DOYLE, ELLIE A
Address: 2800 DUNCAN ROAD
City-St-Zip: LAFAYETTE, IN 47904

Title: AS () Delete
Name: OWENS, MICHAEL
Address: 2800 DUNCAN ROAD
City-St-Zip: LAFAYETTE, IN 47904

Title: D () Delete
Name: SPREITER, ANDREAS
Address: FELDSTRASSE 1
City-St-Zip: ZUG, CH 6301 CH

Title: D () Delete
Name: UMBACH, ANDREAS
Address: FELDSTRASSE 1
City-St-Zip: ZUG, CH 6301 CH

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:

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: MICHAEL OWENS

AS

04/30/2008

Electronic Signature of Signing Officer or Director

Date