2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004192

Entity Name: LEONARD & COMPANY

FILED Aug 28, 2009 Secretary of State

| Current Principal Place of Business: 1450 W. LONG LAKE RD., SUITE 150 | | | New Principal Place of Business: | |
|--|---|--|---|--|
| Current Mailing Address: 1450 W. LONG LAKE RD., SUITE 150 | | | New Mailing Address: | |
| TROY, MI 4 | 48098 | | | |
| FEI Number: 38-3153859 FEI Number Applied For () | | FEI Number Not Applicable () Certificate of Status Desired () | | |
| Name and | Address of Cu | ırrent Registered Agent: | Name and | Address of New Registered Agent: |
| 1200 SOUT | ORATION SYS TH PINE ISLAN DN, FL 33324 | | | |
| The above in the State | | ubmits this statement for the purp | oose of changing it | s registered office or registered agent, or both, |
| SIGNATUR | E: | | | |
| Electronic Signature of Registered Agent | | | | Date |
| | | (2)(b), F.S., the corporation did not re Trust Fund Contribution (). | eceive the prior notice | 3. |
| OFFICERS AND DIRECTORS: | | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | | |
| Title: Name: Address: City-St-Zip: | FRENCH, DAN B | AKE RD., SUITE 150 | Title: Name: Address: City-St-Zip: | CEO (X) Change () Addition FRENCH, DAN B JR. 1450 W. LONG LAKE RD., SUITE 150 TROY, MI 48098 |
| Title: Name: Address: City-St-Zip: | FRENCH, DAN B | AKE RD., SUITE 150 | Title: Name: Address: City-St-Zip: | CFO (X) Change () Addition WEBER, DAVID K 1450 W. LONG LAKE RD., SUITE 150 TROY, MI 48098 |
| Title: Name: Address: City-St-Zip: | LEONARD, WEN | AKE RD., SUITE 150 | Title: Name: Address: City-St-Zip: | () Change () Addition |
| Title: Name: Address: City-St-Zip: | CURRIER, JAME | AKE RD., SUITE 150 | Title: Name: Address: City-St-Zip: | CCO (X) Change () Addition PLOPA, JEFFREY D 1450 W LONG LAKE ROAD STE 150 TROY, MI 48098 |
| Title: Name: Address: | CCOT (X) I PLOPA, JEFFRE 1450 W. LONG L | | Title: Name: Address: | () Change () Addition |

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: JEFFREY D PLOPA CCO 08/28/2009