2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 25, 2009
Secretary of State

DOCUMENT# F96000001145

Entity Name: BALL HORTICULTURAL COMPANY

Current Principal Place of Business:

622 TOWN RD
WEST CHICAGO, IL 60185

New Principal Place of Business:

Current Mailing Address:

622 TOWN RD
WEST CHICAGO, IL 60185

New Mailing Address:

FEI Number: 36-4031900 **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: CPD ( ) Delete
Name: BALL, ANNA C
Address: 625 LAKE RD
City-St-Zip: GLEN ELLYN, IL 60137

Title: VD ( ) Delete
Name: BOONMAN, CORNELIS
Address: 1029 ROBBINS COURT
City-St-Zip: WHEATON, IL 60187

Title: CC ( ) Delete
Name: SAEGER, SHANNON
Address: 857 STERLING AVENUE
City-St-Zip: GENEVA, IL 60134

Title: CFO ( ) Delete
Name: BILLINGS, W. TODD
Address: 3440 HEARTLAND DRIVE
City-St-Zip: GENEVA, IL 60134

Title: TCS ( ) Delete
Name: FRAUENDORFER, TODD
Address: 704 WINGFOOT DRIVE
City-St-Zip: NORTH AURORA, IL 60542

Title: VD ( ) Delete
Name: LEVENTRY, ANNE
Address: 1484 LANTERN CIRCLE
City-St-Zip: NAPERVILLE, IL 60540

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: TODD FRAUENDORFER TCS 03/25/2009

Electronic Signature of Signing Officer or Director Date