2000 UNIFORM BUSINESS REPORT (UBR)

FILED Apr 27, 2000 8:00 am Secretary of State DOCUMENT # **P20829** 1. Entity Name THE LEIDER HORTICULTURAL COMPANIES, INC. 04-27-2000 90090 009 ***150.00 Principal Place of Business Mailing Address 5275 STEINER RD 855 E APTAKISIC RD BOYNTON BCH FL 33436 BUFFALO GROVE IL 60089-6678 UUU4UA4A 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 36-2771753 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CT CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION FL 33324 Zip Code City 8. 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2000 Fee will be \$550.00 Added to Fees Trust Fund Contribution (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11, OFFICERS AND DIRECTORS MARY L. BARSS PTD Addition TITLE ☐ Delete TITLE LEIDER, JAMES M. NAME NAME 855 E. APPRIKLISIC STREET ADDRESS 855 E. APTAKISIC STREET ADDRESS BUFFALO GROVE, IL CITY-ST-7IP CITY-ST-ZIP **BUFFALO GROVE IL** $\overline{\text{VPD}}$ MARK L. LEIDER- UPD Addition Change ☐ Delete TITLE LEIDER, GERARD F. NAME 855 E APPAKISIC 855 E. APTAKISIC STREET ADDRESS STREET ADDRESS BUFFALO GROVE, IL CITY-ST-ZIP **BUFFALO: GROVE IL** CITY-ST-ZIP MARGARET L. KREUTER - VPD ☐ Change **X** Addition Delete TITLE DUNSEY, J H NAME NAME 855 E. APTAKISIC 855 E. APTAKISIC STREET ADDRESS STREET ADDRESS BUFFALO GAOVE, IL CITY-ST-ZIP CITY-ST-ZIP **BUFFALO GROVE IL** Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Defete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 13. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information

indicated on this report or supplemental report is true and accurate and that my 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 in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: