

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P20829

FILED
May 02, 2008
Secretary of State

Entity Name: THE LEIDER HORTICULTURAL COMPANIES, INC.

Current Principal Place of Business:

4501 TAMIAMI TRAIL NORTH
SUITE 300
NAPLES, FL 34103 US

New Principal Place of Business:

Current Mailing Address:

855 E APTAKISIC RD
BUFFALO GROVE, IL 600896678 US

New Mailing Address:

1395 PANTHER LANE
SUITE 300
NAPLES, FL 34109 US

FEI Number: 36-2771753

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPLES-LAWDOCK, INC.
1395 PANTHER LANE
SUITE 300
NAPLES, FL 34109 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PMD () Delete
Name: LEIDER, JAMES M.,
Address: 855 E. APTAKISIC
City-St-Zip: BUFFALO GROVE, IL 60089

Title: VPD () Delete
Name: LEIDER, GERARD F.,
Address: 855 E. APTAKISIC
City-St-Zip: BUFFALO GROVE, IL 60089

Title: T () Delete
Name: LEIDER, FRANCIS M
Address: 855 E APTAKISIC ROAD
City-St-Zip: BUFFALO GROVE, IL 60089

Title: VPD () Delete
Name: BARSS, MARY L
Address: 855 E APTAKISIC ROAD
City-St-Zip: BUFFALO GROVE, IL 60089

Title: VPD () Delete
Name: LEIDER, MARK
Address: 855 E APTAKISIC
City-St-Zip: BUFFALO GROVE, IL 60089

Title: SD () Delete
Name: KREUTER, MARGARET L
Address: 855 E APTAKISIC
City-St-Zip: BUFFALO GROVE, IL 60089

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PMD (X) Change () Addition
Name: LEIDER, JAMES
Address: 855 E. APTAKISIC
City-St-Zip: BUFFALO GROVE, IL 60089

Title: VPD (X) Change () Addition
Name: LEIDER, GERALD F
Address: 855 E. APTAKISIC
City-St-Zip: BUFFALO GROVE, IL 60089

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: JAMES LEIDER

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05/02/2008

Electronic Signature of Signing Officer or Director

Date