

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 841281

FILED
Mar 26, 2009
Secretary of State

Entity Name: THE LELY CORPORATION OF DELAWARE

Current Principal Place of Business:

PO BOX 437
PELLA, IA 50219 US

New Principal Place of Business:

1210 VERMEER RD. E.
PELLA, IA 50219 US

Current Mailing Address:

PO BOX 437
PELLA, IA 50219 US

New Mailing Address:

FEI Number: 51-0098254 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION CREATION NETWORK INC.
11380 PROSPERITY FARMS RD., #221E
PALM BEACH GARDENS, FL 33410 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: D () Delete
Name: VAN DER LELY, ALEXANDER
Address: POST OFFICE BOX 437
City-St-Zip: PELLA, IA 50219

Title: D () Delete
Name: DE LANGE, LUKE
Address: POST OFFICE BOX 437
City-St-Zip: PELLA, IA 50219

Title: P () Delete
Name: LANGEBEEKE, PETER
Address: 8825 TAMiami TRAIL
City-St-Zip: NAPLES, FL 33962

Title: ST () Delete
Name: DE LANGE, LUKE
Address: POST OFFICE BOX 437
City-St-Zip: PELLAS, IA 50219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: VAN DER LELY, ALEXANDER
Address: 1210 VERMEER RD. E.
City-St-Zip: PELLA, IA 50219

Title: D (X) Change () Addition
Name: DE LANGE, LUKE
Address: 1210 VERMEER RD. E.
City-St-Zip: PELLA, IA 50219

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: ST (X) Change () Addition
Name: DE LANGE, LUKE
Address: 1210 VERMEER RD. E.
City-St-Zip: PELLAS, IA 50219

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: PETER LANGEBEEKE

P

03/26/2009

Electronic Signature of Signing Officer or Director

_____ Date