

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 27, 2004 8:00 am
Secretary of State

04-27-2004 90056 013 ***150.00

DOCUMENT # F02000000038
1. Entity Name
LANDSCAPE FORMS, INC.

DO NOT WRITE IN THIS SPACE

24056538

2. Principal Place of Business
431 LAWDALE AVE.
Suite, Apt. #, etc.

3. Mailing Address
431 LAWDALE AVE.
Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
KALAMAZOO, MI

City & State
KALAMAZOO, MI

4. FEI Number
38-1897577

Applied For
 Not Applicable

Zip Country Zip Country
49058 USA 49058 USA

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
GAP ARCHITECTURAL PRODUCTS

Street Address (P.O. Box Number is Not Acceptable)
2255 HOWARD DRIVE

City
WINTER PARK

FL Zip Code
32789

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00 May Be Added to Fees**
Trust Fund Contribution.

10. OFFICERS AND DIRECTORS		
TITLE SEE ATTACHMENT	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DO NOT WRITE IN THIS SPACE
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12. I hereby 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 10 or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* **3/29/04 (267) 381-0490**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

Landscape Forms, Inc.

EIN #38-18975776

Attachment to UBR —

December 31, 2003

F02000000038
24056538

Title: President
William C. Main
10035 Woodlawn Drive
Portage, MI 49002

Title: Vice President
Brian M. Johnson
10169 Woodlawn
Portage, MI 49002

Title: Treasurer and Director
John E. Chipman
8395 E. Main
Galesburg, MI 49053

Title: Vice President
Richard Heriford
16466 Circle Ct.
New Buffalo, MI 49117

Title: Secretary
Patricia Chipman
8395 E. Main
Galesburg, MI 49053

Title: Director
Grant Young
5861 Swallow
Kalamazoo, MI 49009

Title: Vice President
Conrad T. Sutter
6375 Whitney Woods
Richland, MI 49083

Title: Director
Robert O'Boyle
521 S. Riverview Drive
Parchment, MI 49004

Title: Vice President
Rebecca Fulgoni
2472 West C Avenue
Kalamazoo, MI 49009

Title: Director
John A. Chipman
8168 Fernwood
Augusta, MI 49012

Title: Vice President
Arno Yurk
1903 Waite Avenue
Kalamazoo, MI 49008

Title: Director
Brian Kane
570 Alabama Street
San Francisco, CA 94110