2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 03, 2008
Secretary of State

DOCUMENT# F00000002756

Entity Name: ESSEX CRANE RENTAL CORP.

Current Principal Place of Business:

1110 LAKE COOK ROAD
SUITE 220
BUFFALO GROVE, IL 60089 US

New Principal Place of Business:

Current Mailing Address:

1110 LAKE COOK ROAD
SUITE 220
BUFFALO GROVE, IL 60089 US

New Mailing Address:

FEI Number: 22-3729189 **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: D ( ) Delete
Name: NESTOR, JOHN G
Address: 3201 ENTERPRISE PARKWAY, SUITE 200
City-St-Zip: BEACHWOOD, OH 44122

Title: DP ( ) Delete
Name: SCHAD, RONALD
Address: 1110 LAKE COOK ROAD, SUITE 220
City-St-Zip: BUFFALO GROVE, IL 60089 US

Title: DSVP ( ) Delete
Name: KROLL, MARTIN
Address: 1110 LAKE COOK RD SUITE 220
City-St-Zip: BUFFALO GROVE, IL 60089

Title: D ( ) Delete
Name: DEGRANDIS, MICHAEL T
Address: 3201 ENTERPRISE PARKWAY, SUITE 200
City-St-Zip: BEACHWOOD, OH 44122

Title: D ( ) Delete
Name: WRIGHT, EDMOND S
Address: 1110 LAKE COOK RD SUITE 220
City-St-Zip: BUFFALO GROVE, IL 60089

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:

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: MARTIN A. KROLL DSVP 01/03/2008

Electronic Signature of Signing Officer or Director Date