

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 234935

FILED
Jan 29, 2009
Secretary of State

Entity Name: SPRING-LOCK SCAFFOLDING & EQUIPMENT CO

Current Principal Place of Business:

2110 SOUTH US RTE 1
ROCKLEDGE, FL 329553727

New Principal Place of Business:

Current Mailing Address:

2600 N 2ND ST
PHILADELPHIA, PA 19133 US

New Mailing Address:

FEI Number: 59-0902753 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEMUS, MARTHA
10409 FLORIDA AVENUE
TAMPA, FL 33612 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: PD () Delete
Name: RAPOPORT, EARNEST
Address: 1250 GREENWOOD AVENUE
City-St-Zip: JENKINSTON, PA 19046

Title: VD () Delete
Name: RAPOPORT, RANDY
Address: 2600 N 2ND ST
City-St-Zip: PHILADELPHIA, PA 19133

Title: SD () Delete
Name: RAPOPORT, JEFFREY
Address: 458 NORTH APPLETREE
City-St-Zip: LAF HILL, 19444

Title: TD () Delete
Name: KATZ, PAULA
Address: 901 ARTIS ROAD
City-St-Zip: PLYM MTG, PA 19462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: RAPOPORT, MITCHELL
Address: 1002 VALLEY GLEN ROAD
City-St-Zip: ELKINS PARK, PA 19027

Title: SD (X) Change () Addition
Name: RAPOPORT, RANDY
Address: 2600 N 2ND ST
City-St-Zip: PHILADELPHIA, PA 19133

Title: PD (X) Change () Addition
Name: RAPOPORT, JEFFREY
Address: 458 NORTH APPLETREE LANE
City-St-Zip: LAFAYETTE HILL, PA 19444

Title: VPD (X) Change () Addition
Name: KATZ, PAULA
Address: 901 ARTIS ROAD
City-St-Zip: PLYMOUTH MEETING, PA 19462

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: PAULA KATZ

VPD

01/29/2009

Electronic Signature of Signing Officer or Director

_____ Date