2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 642139

Entity Name: HAYNES SCAFFOLDING & SUPPLY, INC.

FILED Jan 31, 2007 Secretary of State

•	,		
Current Principal Place of Business:		New Principal Place of Business:	
1210 ORTEGA RD. WEST PALM BEACH, F	L 33405		
Current Mailing Address:		New Mailing Address:	
1210 ORTEGA RD. WEST PALM BEACH, F	L 33405		
FEI Number: 59-1401160	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
HAYNES, EUGENE M. 1210 ORTEGA ROAD WEST PALM BEACH, F	L US		
The above named entity in the State of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,
SIGNATURE:			
Electro	nic Signature of Registered Age	ent	Date
Election Campaign Financin	g Trust Fund Contribution ().		

OFFICERS AND DIRECTORS:

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD () Delete Title: (X) Change () Addition HAYNES, EUGENE M., HAYNES, EUGENE M., Name: Name: 1210 ORTEGA ROAD Address: 1210 ORTEGA ROAD Address: City-St-Zip: WEST PALM BEACH, FL 33405 City-St-Zip: WEST PALM BEACH, FL 33405 Title: () Delete Title: SD (X) Change () Addition

Name: HAYNES, MICHAEL E.,
Address: 7352 PROVIDENCE ROAD
City-St-Zip: LAKE WORTH, FL 33462

Name: HAYNES, MICHAEL E.,
Address: 7352 PROVIDENCE ROAD
City-St-Zip: LAKE WORTH, FL 33462

Title: VTD () Delete Title: VTD (X) Change () Addition

HAYNES, RICHARD A
3101 ROSTAN LANE
LAKE WORTH, FL

Name: HAYNES, RICHARD A
3101 ROSTAN LANE
City-St-Zip: PALM SPRINGS, FL 33461

I hereby certify that the information supplied with this filing does not qualify for the 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: EUGENE M. HAYNES PD 01/31/2007