

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F93000001707

Entity Name: SID TOOL CO., INC.

FILED
Jan 08, 2009
Secretary of State

Current Principal Place of Business:

75 MAXESS ROAD
MELVILLE, NY 11747

New Principal Place of Business:

Current Mailing Address:

75 MAXESS ROAD
MELVILLE, NY 11747

New Mailing Address:

75 MAXESS ROAD
TAX DEPT.
MELVILLE, NY 11747

FEI Number: 13-5526506

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYES ST.
STE. #105
TALLAHASSEE, FL 32301 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: PCEO () Delete
Name: SANDLER, DAVID
Address: 75 MAXESS ROAD
City-St-Zip: MELVILLE, NY 11747

Title: EVP () Delete
Name: BOEHLKE, CHARLES
Address: 75 MAXESS RD
City-St-Zip: MELVILLE, NY 117473151

Title: VST () Delete
Name: ECCLESTON, THOMAS
Address: 75 MAXESS RD
City-St-Zip: MELVILLE, NY 11747

Title: VD () Delete
Name: BOXER, SHELLY
Address: 75 MAXESS RD
City-St-Zip: MELVILLE, NY 11747

Title: CFO () Delete
Name: BOEHLKE, CHARLES
Address: 75 MAXESS RD
City-St-Zip: MELVILLE, NY 117473151

Title: COB () Delete
Name: MITCHELL, JACOBSON
Address: 75 MAXESS RD
City-St-Zip: MELVILLE, NY 117473151

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VST (X) Change () Addition
Name: ARMSTRONG, STEVEN
Address: 75 MAXESS RD
City-St-Zip: MELVILLE, NY 11747

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: MARGARET MEYER-BATES

STM

01/08/2009

Electronic Signature of Signing Officer or Director

Date