

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000036375

FILED
Mar 24, 2009
Secretary of State

Entity Name: YESCO SCAFFOLDING "LLC"

Current Principal Place of Business:

2500 MINNESOTA AVE
SUITE B
LYNN HAVEN, FL 32444

New Principal Place of Business:

Current Mailing Address:

2500 MINNESOTA AVE
SUITE B
LYNN HAVEN, FL 32444

New Mailing Address:

FEI Number: 55-0867923 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

YESELEVIGE, RICHARD
2500 MINNESOTA AVENUE
SUITE B
LYNN HAVEN, FL 32444 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: YESELEVIGE, RICHARD
Address: 12021 CARUSO DRIVE
City-St-Zip: PANAMA CITY, FL 32404

Title: MGR () Delete
Name: YESELEVIGE, BART
Address: 12009 CARUSO DRIVE
City-St-Zip: PANAMA CITY, FL 32404

Title: MGR () Delete
Name: YESELEVIGE, THELMA
Address: 1515 EAST PARK ROAD
City-St-Zip: PANAMA CITY, FL 32404

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: RICHARD YESELEVIGE

MGR

03/24/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date