2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000019902

Entity Name: SKYLINE SCAFFOLD, INC.

FILED Apr 15, 2009 Secretary of State

Littly Na	ille. OKTLINE	SCAFFOLD, INC.		
Current Principal Place of Business:			New Principal Place of Business:	
2801 45TH VERO BEA	1 ST ACH, FL 3296	57		
Current Mailing Address:			New Mailing Address:	
P.O. BOX VERO BEA	5407 ACH, FL 3296	31		
FEI Number	: 65-0911925	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:	
STE 201	ROGER AN DRIVE ACH, FL 3296	3 US		
	e named entity e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
SIGNATU	RE:			
	Electro	nic Signature of Registered Ag	ent	Date
Election Car	mpaign Financir	g Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (SWINK, KATH P.O. BOX 540 VERO BEACH	7	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VP (SWINK, JUSTI P.O. BOX 540 VERO BEACH	7	Title: Name: Address: City-St-Zip:	() Change () Addition

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: KATHY SWINK P 04/15/2009