

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000019902

Entity Name: SKYLINE SCAFFOLD, INC.

**FILED**  
**Feb 16, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

2801 45TH ST  
VERO BEACH, FL 32967

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 5407  
VERO BEACH, FL 32961

**New Mailing Address:**

FEI Number: 65-0911925

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LA JOIE, ROGER  
3545 OCEAN DRIVE  
STE 201  
VERO BEACH, FL 32963 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SWINK, KATHY G P  
Address: P.O. BOX 5407  
City-St-Zip: VERO BEACH, FL 32961

Title: VP  
Name: SWINK, JUSTIN S VP  
Address: P.O. BOX 5407  
City-St-Zip: VERO BEACH, FL 32961

I hereby 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 all other like empowered.

SIGNATURE: KATHY SWINK

P

02/16/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date