

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K18678

FILED
Jan 05, 2011
Secretary of State

Entity Name: INSURANCE HANDYMAN, INC.

Current Principal Place of Business:

316 WEST PALM DRIVE
3
FLORIDA CITY, FL 33034 US

New Principal Place of Business:

Current Mailing Address:

372 S W 4TH STREET
372 SW 4TH ST
FLORIDA CITY, FL 33034 US

New Mailing Address:

FEI Number: 65-0049907 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

KEARSON, FLOYD BREEDLOVE
372 SW 4TH ST
FLORIDA CITY, FL 33034 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: PD
Name: KEARSON, FLOYD B.
Address: 372 SW 4TH ST
City-St-Zip: FLORIDA CITY, FL

Title: VS
Name: KEARSON, SONI R.
Address: 372 S.W. 4TH STREET
City-St-Zip: FLORIDA CITY, FL

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: KEARSON, FLOYD B.

PD

01/05/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date