
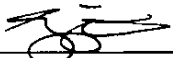


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90021 028 ***138.75

DOCUMENT # L02000023314					
1. Entity Name COMMERCIAL HANDYMAN, LLC					
Principal Place of Business 1048 GOODLETTE STE 201 NAPLES, FL 34102			Mailing Address 1164 GOODLETTE RD NAPLES, FL 34102		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address P.O. Box 10608			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State NAPLES FL		4. FEI Number 55-0796376	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
Zip		Country		04102008 Chg-LLC CR2E083 (12/06)	
6. Name and Address of Current Registered Agent OLSON, CLIFFORD A 1048 GOODLETTE RD. #201 NAPLES, FL 34102			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
OLSON, CLIFFORD A 1048 GOODLETTE RD. #201 NAPLES, FL 34102			FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM COLONIAL SQUARE REALTY, INC. 1048 GOODLETTE #201 NAPLES, FL 34102	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM PRICE, TAMMY 1048 GOODLETTE RD #201 NAPLES, FL 34102	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOULTON, ED 1048 GOODLETTE RD. #201 NAPLES, FL 34102	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOULTON, ED 1048 GOODLETTE RD. #201 NAPLES, FL 34102	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOULTON, ED 1048 GOODLETTE RD. #201 NAPLES, FL 34102	<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MOULTON, ED 1048 GOODLETTE RD. #201 NAPLES, FL 34102	<input type="checkbox"/> Delete			
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:  <u>CLIFFORD OLSON</u> 4-15-08 239-261-2627					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					