

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000116335

FILED
Mar 13, 2007
Secretary of State

Entity Name: HANDEX CONSULTING AND REMEDIATION, LLC

Current Principal Place of Business:

30941 SUNEAGLE DRIVE
MT. DORA, FL 32757

New Principal Place of Business:

Current Mailing Address:

30941 SUNEAGLE DRIVE
MT. DORA, FL 32757

New Mailing Address:

FEI Number: 20-3908055

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERKSON, GARY M
111 NORTH ORANGE AVENUE, SUITE 1200
ORLANDO, FL 32801 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: SCHWARTZ, RONALD N
Address: 3348 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

Title: MGR () Delete
Name: FADELEY, BRETT D
Address: 3348 EDGEWATER DRIVE
City-St-Zip: ORLANDO, FL 32804

ADDITIONS/CHANGES:

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 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: BRETT D FADELEY

MGR

03/13/2007

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