2019 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000024472

Entity Name: HANDYMAN HOME REPAIR SERVICE OF PINELLAS, INC.

FILED
Mar 19, 2019
Secretary of State
4591747881CC

Current Principal Place of Business:

11327-43 STREET NORTH CLEARWATER, FL 34622

Current Mailing Address:

11327-43 STREET NORTH CLEARWATER, FL 34622 US

FEI Number: 59-3307835 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALLBRITTEN, JAMES K 11327-43 STREET NORTH CLEARWATER, FL 34622 US

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

Officer/Director Detail:

Title P Title

NameALLBRITTEN, JAMES KNameALLBRITTEN, JAMES KAddress11327 43RD ST NAddress11327 - 43RD STREET N.City-State-Zip:CLEARWATER FL 33762City-State-Zip:CLEARWATER FL 33762

Title S Title V

Name ALLBRITTEN, JAMES K Name DISALVATORE, JOSEPH P

Address 11327 43RD ST N Address 11327 43RD ST N

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR Title DIRECTOR

Name GOLDBERG, LAURA A Name ALLBRITTEN, SHERYL A

Address 11281 43RD STREET NORTH Address 3850 TALAH DR

City-State-Zip: CLEARWATER FL 33762 City-State-Zip: PALM HARBOR FL 34684

Title DIRECTOR

Name FABRIZI, RICHARD J JR.

Address 11281 43RD STREET NORTH
City-State-Zip: CLEARWATER FL 33762

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: JAMES K ALLBRITTEN

Electronic Signature of Signing Officer/Director Detail

03/19/2019

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