

2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000055808

FILED
Feb 13, 2004
Secretary of State

Entity Name: FRANKLIN ADKINS HANDYMAN SERVICE LLC

Current Principal Place of Business:

353 LAKE MILLS AVE
CHULUOTA, FL 32766 US

New Principal Place of Business:

Current Mailing Address:

353 LAKE MILLS AVE
CHULUOTA, FL 32766 US

New Mailing Address:

FEI Number: 12-9583745 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

ADKINS, FRANKLIN D
353 LAKE MILLS AVE
CHULUOTA, FL 32766 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/MEMBERS:

Title: MGRM () Delete
Name: ADKINS, FRANKLIN D LLL
Address: 353 LAKE MILLS AVE
City-St-Zip: CHULOUTA, FL 32766 US

Title: MGR () Delete
Name: ADKINS, VIRGINIA L MRS
Address: 353 LAKE MILLS AVE
City-St-Zip: CHULUOTA, FL 32766 US

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 Section 119.07(3)(i), 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: FRANKLIN D. ADKINS III

MGRM

02/13/2004

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