

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000033651

FILED
Jul 05, 2007
Secretary of State

Entity Name: BAILEY'S HANDYMAN SERVICE LLC

Current Principal Place of Business:

8607 BACK ROAD
PLANT CITY, FL 33565 US

New Principal Place of Business:

Current Mailing Address:

8607 BACK ROAD
PLANT CITY, FL 33565 US

New Mailing Address:

FEI Number: 20-1078570 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BAILEY, BURBAGE C
8607 PLANT CITY
PLANT CITY, FL 33565 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: MGRM () Delete
Name: BAILEY, BURBAGE C
Address: 8607 BACK ROAD
City-St-Zip: PLANT CITY, FL 33565 US

Title: MGRM () Delete
Name: BAILEY, MELISSA M
Address: 8607 BACK ROAD
City-St-Zip: PLANT CITY, FL 33565 US

Title: MGRM () Delete
Name: WATSON, JILL D
Address: 5710 TURKEY TREE LANE
City-St-Zip: PLANT CITY, FL 33567 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: BURBAGE C. BAILEY

PRES

07/05/2007

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