

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000001264

Entity Name: HELPFUL HANDYMAN, LLC

FILED  
Jul 24, 2006  
Secretary of State

## Current Principal Place of Business:

6144 103RD AVE. N  
PINELLAS PARK, FL 33782

## New Principal Place of Business:

11625 78TH TERR N  
SEMINOLE, FL 33772

## Current Mailing Address:

6144 103RD AVE. N  
PINELLAS PARK, FL 33782

## New Mailing Address:

11625 78TH TERR N  
SEMINOLE, FL 33772

FEI Number: 20-2125853      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:

SHAFER, CHRIS  
6144 103RD AVE. N  
PINELLAS PARK, FL 33782      US

## Name and Address of New Registered Agent:

SHAFER, CHRIS  
11625 78TH TERR N  
SEMINOLE, FL 33772      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: CHRIS SHAFER

07/24/2006

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SHAFER, CHRIS  
Address: 6144 103RD AVE. N  
City-St-Zip: PINELLAS PARK, FL 33782

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: SHAFER, CHRIS  
Address: 11625 78TH TERR N  
City-St-Zip: SEMINOLE, FL 33772

Title: MGRM ( ) Change (X) Addition  
Name: BROOKS, THOMAS  
Address: 300 2ND AVE SE SLIP 56  
City-St-Zip: ST. PETERSBERG, FL 33701

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: CHRIS SHAFER

MGRM

07/24/2006

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