## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # L05000013893

1. Entity Name

HANDY RANDY SERVICES, LLC



Principal Place of Business

1820 S.W. 47TH ST CAPE CORAL, FL 33914

Mailing Address

1820 S.W. 47TH ST CAPE CORAL, FL 33914

## FILED Feb 15, 2007 8:00 am Secretary of State

02-15-2007 90273 030 \*\*\*\*50.00

60015671



02062007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-4371205

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

Daytime Phone #

6. Name and Address of Current Registered Agent

TROWBRIDGE, RANDY 1820 S.W. 47TH ST CAPE CORAL, FL 33914

DO	NOT	WRITE
IN	THIS	<b>SPACE</b>

8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE	Signature, typed or prints name of registered agent and title if applicable.	(NOTE: Registered Agent <b>cig</b> nature required when reinstating)	DATE	
Filing Fee is \$50.00 Due by May 1, 2007				
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR TROWBRIDGE, RANDY 1820 S.W. 47TH ST CAPE CORAL, FL 33914			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT W	RITE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 executive this report as required by Chapter 608, Florida Statutes.				