2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Sep 08, 2006
Secretary of State

DOCUMENT# L05000040005

Entity Name: WILLIE DEAN SESCO HANDYMAN, LLC

Current Principal Place of Business:

4749 PINE LANE
PACE, FL 32571 US

New Principal Place of Business:

Current Mailing Address:

4749 PINE LANE
PACE, FL 32571 US

New Mailing Address:

FEI Number: 36-3764284 **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:

SESCO, WILLIE D
4749 PINE LANE
PACE, FL 32571 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: SESCO, WILLIE D
Address: 4749 PINE LANE
City-St-Zip: PACE, FL 32571 US

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

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

ADDITIONS/CHANGES:

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

Title: MGRM ( ) Change (X) Addition
Name: DRIGGERS, JUSTIN L
Address: 6252 FOX RUN STREET
City-St-Zip: MILTON, FL 32583 US

Title: MGRM ( ) Change (X) Addition
Name: DRIGGERS, JACK D
Address: 6252 FOX RUN STREET
City-St-Zip: MILTON, FL 32583

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: WILLIE DEAN SESCO MGRM 09/08/2006

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