


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 27, 2007 8:00 am
Secretary of State

07-27-2007 90020 050 ****50.00

DOCUMENT # L06000012909	
1. Entity Name HANK'S HANDYMAN SERVICE, LLC	

Principal Place of Business 8019 SWEETGUM LOOP ORLANDO, FL 32835	Mailing Address 8019 SWEETGUM LOOP ORLANDO, FL 32835
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60053593



2. Principal Place of Business - No P.O. Box # 8019 SWEETGUM LOOP	3. Mailing Address SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.

07092007 Chg-LLC CR2E083 (12/06)

City & State ORLANDO FLORIDA	City & State SAME
Zip 32835	Country ORANGE
Country ORANGE	Zip SAME
Country SAME	Country SAME

4. FEI Number 204144220	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent	
HENRY, KEITH E 8019 SWEETGUM LOOP ORLANDO, FL 32835	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$50.00 Due by September 14, 2007	Make check payable to Florida Department of State
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9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM HENRY, KEITH E 8019 SWEETGUM LOOP ORLANDO, FL 32835 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Keith E. Henry **7-31-07** **4073420894**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #