2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000060193

City-St-Zip:

CRAWFORDVILLE, FL 32327

Entity Name: HAND MENTERPRISES, LLC

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 275 HARVEY MILL ROAD CRAWFORDVILLE, FL 32327 **Current Mailing Address: New Mailing Address:** 275 HARVEY MILL ROAD CRAWFORDVILLE, FL 32327 FEI Number: 45-0551003 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARVEY, STACY L 275 HARVEY MILL ROAD CRAWFORDVILLE, FL 32327 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: Electronic Signature of Registered Agent Date MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES: MGR Title: () Change () Addition () Delete HARVEY, STACY L Name: Name: Address: 275 HARVEY MILL ROAD Address: City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: MCKENZIE, ROBERT Name: Address: 40 CASORA DRIVE Address: City-St-Zip: CRAWFORDVILLE, FL 32327 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition HENDERSON, ALVIN D Name: Name: 275 HARVEY MILL ROAD Address: Address:

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.

City-St-Zip:

SIGNATURE: STACY L. HARVEY MGR 04/30/2007