## 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L07000083226

Address:

City-St-Zip:

Entity Name: FRED'S HANDYMAN SERVICE, L.L.C.

FILED Apr 22, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5857 NW FOGEL CT PORT ST. LUCIE, FL 34986 **Current Mailing Address: New Mailing Address:** 5857 NW FOGEL CT PORT ST. LUCIE, FL 34986 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CASTILO, FREDINAND 5857 NW FOGEL CT PORT ST. LUCIE, FL 34986 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: MGRM Title: () Change () Addition () Delete CASTILLO, FREDINAND Name: Name: Address: 5857 NW FOGEL CT Address: City-St-Zip: PORT ST. LUCIE, FL 34986 City-St-Zip: Title: Title: MGRM ( ) Change (X) Addition () Delete Name: Name: CASTILLO, MARYANN

Address:

City-St-Zip:

5857 N.W. FOGEL CT

PORT ST LUCIE, FL 34986

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.

SIGNATURE: FREDINAND CASTILLO MGRM 04/22/2008