

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L42321

Entity Name: QUICK N' HANDY, INC.

FILED  
Apr 04, 2007  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 568  
MACCLENNY, FL 32063

**New Principal Place of Business:**

489 N. SIXTH STREET  
MACCLENNY, FL 32063

**Current Mailing Address:**

P.O. BOX 568  
MACCLENNY, FL 32063

**New Mailing Address:**

FEI Number: 59-2982501      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GORDON, MICHAEL R.  
4868 WALNUT GROVE CT.  
JACKSONVILLE, FL 32225      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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GORDON, MICHAEL R.,  
Address: 4836 WALNUT GROVE CT.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: STD ( ) Delete  
Name: GORDON, CAREN R.,  
Address: 4836 WALNUT GROVE CT.  
City-St-Zip: JACKSONVILLE, FL 32225

Title: D ( ) Delete  
Name: GORDON, ANGIE, M.,  
Address: 11921 ARBOR LAKE DR.  
City-St-Zip: JACKSONVILLE, FL 32225

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: GORDON, ANGIE, M.,  
Address: 14012 SUMMERBREEZE DR. E.  
City-St-Zip: JACKSONVILLE, FL 32218

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 or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAREN R. GORDON

S/T

04/04/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date