

NON-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000066758

1. Entity Name
HANDI-SERV NO. 2, INC.

Principal Place of Business
**238 PALM LEAF AVENUE
LAKE WALES, FL 33853**

Mailing Address
**238 PALM LEAF AVENUE
LAKE WALES, FL 33853**



01212005 No Chg-F CR2E034 (10/03)

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4. FEI Number
59-1420521

Applied For
 (Not Applicable)

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**BUSH, WANDA E
238 PALM LEAF AVE
LAKE WALES, FL 33898**

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BUSH, WANDA E
STREET ADDRESS	238 PALM LEAF AVENUE
CITY- ST- ZIP	LAKE WALES, FL 33853
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, will or other like empowerment.

SIGNATURE: Wanda E Bush Jan 27, 2005 ³⁶³ 676-5062
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR