## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P00000068947

Entity Name: PHIL'S HANDYMAN SERVICES, INC.

2582 S. MAGUIRE RD., SUITE 267

OCOEE, FL 34734

Address:

City-St-Zip:

FILED Apr 02, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 2582 S. MAGUIRE RD. SUITE 267 OCOEE, FL 34734 **New Mailing Address: Current Mailing Address:** 2582 S. MAGUIRE RD. SUITE 267 OCOEE, FL 34734 FEI Number: 59-3657088 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: SMALL BUSINESS RESOURCES, USA, INC. 1601 PARK CENTER DRIVE SUITE 6A ORLANDO, FL 32835 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 Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: ( ) Delete Title: () Change () Addition WAGNER, PHILIP B Name: Name: 2582 S. MAGUIRE RD., SUITE 267 Address: Address: City-St-Zip: OCOEE, FL 34734 City-St-Zip: Title: () Delete Title: () Change () Addition Name: WAGNER, AMY L Name:

Address:

City-St-Zip:

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 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: AMY WAGNER D 04/02/2009