


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 09, 2006 8:00 am**  
**Secretary of State**

02-09-2006 90032 034 \*\*\*150.00

**DOCUMENT # P00000101201**

1. Entity Name  
**J.L. HANDY ENTERPRISES, INC.**



Principal Place of Business  
**4489 BROOKSDALE DRIVE  
 SARASOTA, FL 34232**

Mailing Address  
**P.O. BOX 25053  
 SARASOTA, FL 34277**

40011441



2. Principal Place of Business  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

02072006 Chg-P CR2E034 (11/05)

City & State

4. FEI Number  
**65-1055455**

Applied For  
 Not Applicable

City & State

Zip Country

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

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**SPIEGEL & UTRERA, P.A.  
 343 ALMERIA AVENUE  
 CORAL GABLES, FL 33134**

Name  
**Jeff Handy**

Street Address (P.O. Box Number is Not Acceptable)  
**4489 Brooksdale Drive**

City **Sarasota** FL Zip Code **34232**

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: Jeff Handy Jeff Handy 2/7/06

Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
 After May 1, 2006 Fee will be \$550.00**

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

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE  
**PSTD**  Delete

NAME  
**HANDY, JEFF L**

STREET ADDRESS  
**4489 BROOKSDALE DRIVE**

CITY-ST-ZIP  
**SARASOTA, FL 34232**

TITLE  
**Director**  Change  Addition

NAME  
**Oliver Chevalier**

STREET ADDRESS  
**2654 Grand Cayman**

CITY-ST-ZIP  
**Sarasota FL 34231**

TITLE  
**VP**  Delete

NAME  
**RODGERS, DARREN**

STREET ADDRESS  
**5031 LUCINE RD.**

CITY-ST-ZIP  
**VENICE, FL 34293**

TITLE  
 Change  Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE  
**ST**  Delete

NAME  
**HANDY, JACK**

STREET ADDRESS  
**6840 CORRAL CR.**

CITY-ST-ZIP  
**SARASOTA, FL 34243**

TITLE  
 Change  Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE  
**D**  Delete

NAME  
**ANDREWS, NEAL**

STREET ADDRESS  
**4136 53 RD AVE WEST APT # 704**

CITY-ST-ZIP  
**BRADENTON, FL 34210**

TITLE  
 Change  Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE  
 Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE  
 Change  Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE  
 Delete

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE  
 Change  Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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, with all other like empowered.

SIGNATURE: Jeff Handy Jeff L. Handy 2/7/06 941-371-0504

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #