

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000131231

FILED
Mar 15, 2005
Secretary of State

Entity Name: NORM'S DETAILED HANDYMAN SERVICES, INC.

Current Principal Place of Business:

615 AURORA STREET
SOUTH DAYTONA, FL 32119

New Principal Place of Business:

615 AURORA STREET
SOUTH DAYTONA, FL 321192007

Current Mailing Address:

615 AURORA STREET
SOUTH DAYTONA, FL 32119

New Mailing Address:

615 AURORA STREET
SOUTH DAYTONA, FL 321192007

FEI Number: 20-0383022

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BERARD, NORMAND
615 AURORA STREET
SOUTH DAYTONA, FL 32119 US

Name and Address of New Registered Agent:

BERARD, NORMAND A
615 AURORA STREET
SOUTH DAYTONA, FL 321192007 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: NORMAND A BERARD

03/15/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BERARD, NORMAND
Address: 615 AURORA STREET
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: VP () Delete
Name: BERARD, MOLLYJO
Address: 615 AURORA STREET
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BERARD, NORMAND A
Address: 615 AURORA STREET
City-St-Zip: SOUTH DAYTONA, FL 321192007

Title: VP (X) Change () Addition
Name: BERARD, MOLLYJO A
Address: 615 AURORA STREET
City-St-Zip: SOUTH DAYTONA, FL 321192007

Title: TR/S () Change (X) Addition
Name: VIALPANDO, DIANA P
Address: 615 AURORA STREET
City-St-Zip: SOUTH DAYTONA, FL 321192007

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: NORMAND A BERARD

PRE

03/15/2005

Electronic Signature of Signing Officer or Director

Date