## 2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **DOCUMENT # P03000158114**

1. Entity Name

1ST CLASS HANDYMAN SERVICES INC.



**FILED** Jan 25, 2008 08:00 AN Secretary of State

Fee Required

Principal Place of Business

1399 S. BELCHER RD LOT 79 LARGO, FL 33771

Mailing Address

1399 S. BELCHER RD LOT 79 LARGO, FL 33771



## DO NOT WRITE IN THIS SPACE

No Chg-P CR2E034 (11/05) 01222008 Applied For 4. FEI Number 80-0084785 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

6. Name and Address of Current Registered Agent

MONGEON, JOHN J 1399 S. BELCHER RD LOT 79 LARGO, FL 33771

SIGNATURE:

## DO NOT WRITE IN THIS SPACE

	named entity submits this statement for the paints of registered agent.	ourpose of changing its register	ed office or regis	stered agent, or both	i, in the State of F	lorida. I am familiar with,	and accept
SIGNATURE_	Signature, typed or printed name of registered agent and title	il applicable (NOTE: Registere	id Agent signature requ	wed when reinstating)		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.				55.00 May Be dded to Fees			
10.	OFFICERS AND DIREC	CTORS			,	1 ,	
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	PD MONEGEON, JOHN J 1399 S. BELCHER RD LOT 79 LARGO, FL 33771				. Jugoo	00798177 8-80016-019: 1	
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12. Thereby 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.

ANGHATURE AND TYPED OR PRINTED KAME OF BIGHTING OFFICER OR DIRECTOR