

# **2009 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000086453

Entity Name: HANDYCO, INC.

**FILED**  
**Oct 23, 2009**  
**Secretary of State**

**Current Principal Place of Business:**

4516 LAKE BENJI CT.  
MOUNT DORA, FL 32757

**New Principal Place of Business:**

**Current Mailing Address:**

4516 LAKE BENJI CT.  
MOUNT DORA, FL 32757

**New Mailing Address:**

P.O. BOX 745  
ZELLWOOD, FL 32798

FEI Number: 20-1191095

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

HANDY, MICHAEL S  
4516 LAKE BENJI CT.  
MOUNT DORA, FL 32757 US

**Name and Address of New Registered Agent:**

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: MICHAEL HANDY

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PRES ( ) Delete  
Name: HANDY, MICHAEL S  
Address: 4516 LAKE BENJI CT.  
City-St-Zip: MOUNT DORA, FL 32757

Title: VP ( ) Delete  
Name: HANDY, DEAN P  
Address: 9 N. LAKE CORTEZ DR.  
City-St-Zip: APOPKA, FL 32757

Title: SCTY ( ) Delete  
Name: HANDY, MELESSA A  
Address: 4516 LAKE BENJI CT.  
City-St-Zip: MOUNT DORA, FL 32757

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
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: MICHAEL HANDY

Electronic Signature of Signing Officer or Director

PRES

10/23/2009

Date