

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000139964

FILED  
May 02, 2005  
Secretary of State

Entity Name: HONEY DID HANDY MAN INC

## Current Principal Place of Business:

14 MAGNOLIA AVE  
PALM COAST, FL 32164

## New Principal Place of Business:

14 MAGNOLIA ROAD  
PALM COAST, FL 32137

## Current Mailing Address:

3 CHERRY COURT  
PALM COAST, FL 32164

## New Mailing Address:

3 CHERRY COURT  
PALM COAST, FL 32137

FEI Number: 20-1721843

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LOGUIDICE, JOE  
1515 RIGDEWOOD AVE  
A  
HOLLY HILL, FL 32117 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:

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: P ( ) Delete  
Name: FOX, RALPH  
Address: 3 CHERRY COURT  
City-St-Zip: PALM COAST, FL 32164

Title: TR ( ) Delete  
Name: FOX, SHARON  
Address: 3 CHERRY COURT  
City-St-Zip: PALM COAST, FL 32164

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: FOX, RALPH  
Address: 3 CHERRY COURT  
City-St-Zip: PALM COAST, FL 32137

Title: TR (X) Change ( ) Addition  
Name: FOX, SHARON  
Address: 3 CHERRY COURT  
City-St-Zip: PALM COAST, FL 32137

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: RALPH FOX

P

05/02/2005

Electronic Signature of Signing Officer or Director

Date