

2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P05000124018

**FILED
Dec 03, 2008
Secretary of State****Entity Name:** HANDYMAN EXPERT OF CENTRAL FLORIDA INC**Current Principal Place of Business:**405 PINEWAY
SANFORD, FL 32773**New Principal Place of Business:****Current Mailing Address:**P O BOX 681
SANFORD, FL 32772**New Mailing Address:**

FEI Number: 20-3426880 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:J. MICHAEL HARTMAN & COMPANY INC
312 W FIRST STREET
SUITE 503
SANFORD, FL 32771 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

OFFICERS AND DIRECTORS:Title: PST () Delete
Name: PRIEST, MAUREEN S
Address: 405 PINEWAY
City-St-Zip: SANFORD, FL 32773Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: PST (X) Change () Addition
Name: REED, MAUREEN S
Address: 405 PINEWAY
City-St-Zip: SANFORD, FL 32773Title: VP () Change (X) Addition
Name: REED, JOIE D
Address: 405 PINE WAY
City-St-Zip: SANFORD, FL 32773

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: MAUREEN REED

PST

12/03/2008

Electronic Signature of Signing Officer or Director

Date