2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000143695

Entity Name: SMC HANDYMAN SERVICES, INC.

FILED Apr 15, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
11251 NE [.] ARCHER,	101ST COURT FL 32618 (JS			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
11251 NE [.] ARCHER,	101ST COURT FL 32618 (JS			
FEI Number:	59-3820669	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and	Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
11251 NE ARCHER, The above		JS	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATURE:					
	Electron	ic Signature of Registered Agen	t	Date	
Election Can	npaign Financing	Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () CONOVER, STE 11251 NE 101S ARCHER, FL 3	T COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () CONOVER, TOI 11251 NE 101S ARCHER, FL 3	T COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TREA () CONOVER, TOI 11251 NE 101S ARCHER, FL 3	T COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SECR () CONOVER, TOI 11251 NE 101S ARCHER, FL 3	T COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	OWNE () CONOVER, STE 11251 NE 101S ARCHER, FL 3	T COURT	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: TONYA CONOVER VP 04/15/2006