

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000040270

Entity Name: PREFERRED HANDYMAN, INC

FILED
May 07, 2009
Secretary of State

Current Principal Place of Business:

1307 RIVER HILLS CIRCLE
UNIT 18
JACKSONVILLE, FL 32211

New Principal Place of Business:

6822 W PATRICK DR
HOMOSASSA, FL 34446

Current Mailing Address:

1307 RIVER HILLS CIRCLE
UNIT 18
JACKSONVILLE, FL 32211

New Mailing Address:

6822 W PATRICK DR
HOMOSASSA, FL 34446

FEI Number: 20-4567522

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LANDRY, TIMOTHY
1307 RIVER HILLS CIRCLE UNIT 18
JACKSONVILLE, FL 32211 US

Name and Address of New Registered Agent:

LANDRY, TIMOTHY
6822 W PATRICK DR
HOMOSASSA, FL 34446 US

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:

05/07/2009

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: DPST () Delete
Name: LANDRY, TIMOTHY I
Address: 1307 RIVER HILLS CIRCLE UNIT 18
City-St-Zip: JACKSONVILLE, FL 32211

Title: TD () Delete
Name: LANDRY, TIMOTHY A
Address: 1307 RIVER HILLS CIRCLE UNIT 18
City-St-Zip: JACKSONVILLE, FL 32211

Title: DVP () Delete
Name: LANDRY, EMILY R
Address: 1307 RIVER HILLS CIRCLE E.
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition
Name: LANDRY, TIMOTHY I
Address: 6822 W PATRICK DR.
City-St-Zip: HOMOSASSA, FL 34446

Title: TD (X) Change () Addition
Name: LANDRY, TIMOTHY A
Address: 6822 W PATRICK DR.
City-St-Zip: HOMOSASSA, FL 34446

Title: DVP (X) Change () Addition
Name: LANDRY, EMILY R
Address: 6822 W PATRICK DR.
City-St-Zip: HOMOSASSA, FL 34446

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: EMILY ROSE LANDRY

DVP

05/07/2009

Electronic Signature of Signing Officer or Director

Date