2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2009
Secretary of State

DOCUMENT# P07000034079

Entity Name: MR. HANDYMAN OF FLORIDA SYSTEM, INC.

Current Principal Place of Business:

21 GOLDEN GATE DRIVE
SUITE A
SAN RAFAEL, CA 94901 US

New Principal Place of Business:

Current Mailing Address:

21 GOLDEN GATE DRIVE
SUITE A
SAN RAFAEL, CA 94901 US

New Mailing Address:

FEI Number: 42-1725851 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: GORNET, MICHAEL E
Address: 21 GOLDEN GATE DRIVE
City-St-Zip: SAN RAFAEL, CA 94901 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD (X) Change ( ) Addition
Name: GORNET, MICHAEL E
Address: 21 GOLDEN GATE DRIVE
City-St-Zip: SAN RAFAEL, CA 94901 US

Title: D ( ) Change (X) Addition
Name: GORNET, BILL
Address: 261 COPPER GLOW COURT
City-St-Zip: HENDERSON, NV 89074 US

Title: D ( ) Change (X) Addition
Name: BILBAO, LISA
Address: 427 SHERWOOD DRIVE #208
City-St-Zip: SAUSALITO, CA 94965 US

Title: D ( ) Change (X) Addition
Name: SUMRALL, CAMIE
Address: 26 MEADOW DRIVE
City-St-Zip: SAN RAFAEL, CA 94903

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 E. GORNET PSTD 01/12/2009

Electronic Signature of Signing Officer or Director Date