

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P10000058378

**FILED**  
**Mar 28, 2012**  
**Secretary of State**

**Entity Name:** MSP CARPENTER & HANDYMAN, INC

**Current Principal Place of Business:**

5703 FARGO DR, EAST  
JACKSONVILLE, FL 32207

**New Principal Place of Business:**

**Current Mailing Address:**

5703 FARGO DR, EAST  
JACKSONVILLE, FL 32207

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DELIC, FUADA  
4915 BEACH BLVD, SUITE 2A  
JACKSONVILLE, FL 32207    US

**Name and Address of New Registered Agent:**

SKOCIC, MILAN  
5703 FARGO DR EAST  
JACKSONVILLE, FL 32207    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: MILAN SKOCIC

\_\_\_\_\_  
Electronic Signature of Registered Agent

03/28/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title:                      P  
Name:                      SKOCIC, MILAN  
Address:                      5703 FARGO DRIVE E  
City-St-Zip:                      JACKSONVILLE, FL 32207

I hereby 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 all other like empowered.

SIGNATURE: MILAN SKOCIC

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

OWNE

03/28/2012

\_\_\_\_\_  
Date