2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P95000024352

FILED Mar 03, 2004 Secretary of State

Entity Name: HANDYMAN HOME REPAIR SERVICE OF SARASOTA, INC.

Current Principal Place of Business: New Principal Place of Business:

1220 ZACCHINI AVE. 11327 43RD ST. N

SARASOTA, FL 34237 US CLEARWATER, FL 34684 US

Current Mailing Address: New Mailing Address:

11327 43RD ST N CLEARWATER, FL 34684

FEI Number: 65-0571962 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DI SALVATORE, ANGELO
ALLBRITTEN, JAMES K
11327 43RD ST N
11327 43RD ST N

CLEARWATER, FL 34684 US CLEARWATER, FL 34684 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: JAMES K ALLBRITTEN 03/03/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: DI SALVATORE, ANGELO Name: DI SALVATORE, JOSEPH P

 Address:
 11327 43RD ST N
 Address:
 11327 43RD ST N

 City-St-Zip:
 CLEARWATER, FL
 City-St-Zip:
 CLEARWATER, FL

Title: V () Delete Title: () Change () Addition

 Name:
 MARCIANO, FRANKLIN A
 Name:

 Address:
 11327 43RD ST. NORTH
 Address:

 City-St-Zip:
 CLEARWATER, FL
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 FABRIZI, RICHARD J
 Name:

 Address:
 870 PINELLAS BAYWAY
 Address:

 City-St-Zip:
 TIERRA VERDE, FL
 City-St-Zip:

Title: S () Delete Title: () Change () Addition

 Name:
 ALLBRITTEN, JAMES K
 Name:

 Address:
 11327 43RD ST N
 Address:

 City-St-Zip:
 CLEARWATER, FL 33762
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JAMES K ALLBRITTEN SEC 03/03/2004