

**2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P08000059601

**Entity Name:** JME HANDY WORK, INC.

**Current Principal Place of Business:**

3640 N. RIDE DR.  
JACKSONVILLE, FL 32223

**Current Mailing Address:**

3640 N. RIDE DR.  
JACKSONVILLE, FL 32223

**FEI Number:** 32-0254851

**Certificate of Status Desired:** No

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

EYLER, JAMES B. SR.  
3640 N. RIDE DR.  
JACKSONVILLE, FL 32223 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:**

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

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name EYLER, JAMES B. SR.  
Address 3640 N. RIDE DR.  
City-State-Zip: JACKSONVILLE FL 32223

*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:** EYLER, JAMES B. SR.

**PRESIDENT**

**04/14/2014**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date