

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000033651

**Entity Name:** BAILEY"S HANDYMAN SERVICE LLC

**Current Principal Place of Business:**

8607 BACK ROAD  
PLANT CITY, FL 33565

**Current Mailing Address:**

8607 BACK ROAD  
PLANT CITY, FL 33565 US

**FEI Number:** 20-1078570

**Certificate of Status Desired:** No

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

BAILEY, BURBAGE C  
8607 PLANT CITY  
PLANT CITY, FL 33565 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

**Authorized Person(s) Detail :**

Title MGRM  
Name BAILEY, BURBAGE C  
Address 8607 BACK ROAD  
City-State-Zip: PLANT CITY FL 33565

Title MGRM  
Name BAILEY, MELISSA M  
Address 8607 BACK ROAD  
City-State-Zip: PLANT CITY FL 33565

Title MGRM  
Name WATSON, JILL D  
Address 5697 HAWKS CREEK TRL.  
City-State-Zip: PLANT CITY FL 33567

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BURBAGE C BAILEY

**OWNER**

**01/25/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date