

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000023823

**Entity Name:** EXCALIBUR HANDYMAN, LLC

**Current Principal Place of Business:**

6592 PLANTATION PRESERVE CRL N  
FT. MYERS, FL 33966

**Current Mailing Address:**

6592 PLANTATION PRESEVRE CRL N  
FT. MYERS, FL 33966 US

**FEI Number: 81-1359972**

**Certificate of Status Desired: Yes**

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

DLF REGISTERED AGENT SERVICE, LLC  
10181 SIX MILE CYPRESS PARKWAY  
SUITE C  
FORT MYERS, FL 33966 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            AMBR  
Name            KING, WILLIAM A III  
Address        6592 PLANTATION PRESERVE CRL N  
City-State-Zip: FT.MYERS FL 33966

Title            AMBR  
Name            KING, BRITTANY S  
Address        6592 PLANTATION PRESEVRE CRL N  
City-State-Zip: FT. MYERS FL 33966

*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: WILLIAM A KING 3**

**HANDYMAN**

**02/13/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date