

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000009926

**Entity Name:** DOC'S CORNER, LLC

**Current Principal Place of Business:**

22 MASHES SANDS ROAD  
PANACEA, FL 32346

**Current Mailing Address:**

P.O.BOX 189  
PANACEA, FL 32346 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

PETRANDIS, ANGELO E  
22 MASHES SANDS ROAD  
PANACEA, FL 32346 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 MGR  
Name PETRANDIS, ANGELO  
Address 22 MASHES SANDS ROAD  
City-State-Zip: PANACEA FL 32346

*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:** ANGELO PETRANDIS

**PRESIDENT**

**05/01/2015**

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

\_\_\_\_\_  
Date