

# **2011 LIMITED PARTNERSHIP ANNUAL REPORT**

DOCUMENT# A07000000758

**FILED**  
**Feb 16, 2011**  
**Secretary of State**

**Entity Name:** DOCKIE'S DONE LIMITED PARTNERSHIP

**Current Principal Place of Business:**

880 NW 13TH STREET  
1B  
BOCA RATON, FL 33486 US

**New Principal Place of Business:**

**Current Mailing Address:**

880 NW 13TH STREET  
1B  
BOCA RATON, FL 33486 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

KARL, MITCHELL M. D.  
880NW 13TH STREET  
1B  
BOCA RATON, FL 33486 US

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

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

**GENERAL PARTNER INFORMATION:**

Document #: L07000060940  
Name: DOCKIE'S DONE, LLC  
Address: 880 NW 13TH STREET, SUITE 1B  
City-St-Zip: BOCA RATON, FL 33486 US

**ADDRESS CHANGES ONLY:**

Address:  
City-St-Zip:

I hereby certify that the information indicated on this 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 General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: MITCHELL KARL

MGR

02/16/2011

\_\_\_\_\_  
Electronic Signature of Signing General Partner

\_\_\_\_\_  
Date