

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000016840

Entity Name: DOC-CAP, L.L.C.

FILED
Jul 18, 2006
Secretary of State

Current Principal Place of Business:

7701 BAYMEADOWS CIRCLE W., #1077
JACKSONVILLE, FL 32256

New Principal Place of Business:

269 SCRUB JAY DR
ST AUGUSTINE, FL 32092

Current Mailing Address:

7701 BAYMEADOWS CIRCLE W., #1077
JACKSONVILLE, FL 32256

New Mailing Address:

269 SCRUB JAY DR
ST AUGUSTINE, FL 32092

FEI Number: 20-2368124 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

HOLBROOK, H. LEON III
ONE INDEPENDENT DRIVE, SUITE 2301
JACKSONVILLE, FL 32202 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

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FLETCHER, ALEXANDER
Address: 7701 BAYMEADOWS CIRCLE W., #1077
City-St-Zip: JACKSONVILLE, FL 32256

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FLETCHER, ALEXANDER
Address: 269 SCRUB JAY DR
City-St-Zip: ST AUGUSTINE, FL 32092

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ALEXANDER FLETCHER

MGR

07/18/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date