

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000016840

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

**FILED**  
**Jun 13, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

269 SCRUB JAY DR  
ST AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

269 SCRUB JAY DR  
ST AUGUSTINE, FL 32092

**New Mailing Address:**

FEI Number: 20-2368124

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

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

**MANAGING MEMBERS/MANAGERS:**

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

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 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: ALEX FLETCHER

MGR

06/13/2011

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