

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED

Apr 27, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000022083

1. Entity Name

DOK, LLC



Principal Place of Business

1645 SE 3RD CT, ADMIRAL BLDG, STE 214
DEERFIELD BEACH FL 33441

Mailing Address

1645 SE 3RD CT, ADMIRAL BLDG, STE 214
DEERFIELD BEACH FL 33441



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E083 (10/06)

City & State

City & State

4. FEI Number

75-2305280

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COKER, RICHARD G JR, ESQ
1404 S ANDREWS AVE
FT LAUDERDALE FL

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$50.00
Make Check Payable to Florida Department of State
Due By May 1, 2007

9. MANAGING MEMBERS/MANAGERS

TITLE: MGRM ☐ Delete
NAME: THIES, WILLIAM F
STREET ADDRESS: 1645 SE 3RD CT, ADMIRAL BLDG, STE 214
CITY-STATE-ZIP: DEERFIELD BEACH FL 33441

TITLE: MGRM ☐ Delete
NAME: WOOD, BRENDAN M
STREET ADDRESS: 821 N.W. 75TH TERRACE
CITY-STATE-ZIP: PLANTATION FL 33317

TITLE: MGRM ☐ Delete
NAME: WOOD, JAMES W
STREET ADDRESS: 821 N.W. 75TH TERRACE
CITY-STATE-ZIP: PLANTATION FL 33317

TITLE: MGRM ☐ Delete
NAME: THIES, JESSICA T
STREET ADDRESS: 68 FIESTA WAY
CITY-STATE-ZIP: FORT LAUDERDALE FL 33301

TITLE: MGRM ☐ Delete
NAME: THIES, PAIGE N
STREET ADDRESS: 186 MANCEAUX RD
CITY-STATE-ZIP: WEST PALM BEACH FL 33405

TITLE: MGRM ☐ Delete
NAME: ROTHMAN, ALEXA N
STREET ADDRESS: 186 MANCEAUX RD
CITY-STATE-ZIP: WEST PALM BEACH FL 33405

10. ADDITIONS/CHANGES

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: 000000737962
CITY-STATE-ZIP: 05/11/07-80048-020 50.00

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

TITLE: ☐ Change ☐ Addition
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TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

WILLIAM F. THIES

4-23-07

954-591-5116