

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000048793

**FILED**  
**Feb 12, 2010**  
**Secretary of State**

**Entity Name:** FOXX MORTGAGE DOCTOR, LLC

**Current Principal Place of Business:**

103 W. HAMILTON AVE.  
TAMPA, FL 33604 US

**New Principal Place of Business:**

**Current Mailing Address:**

103 W. HAMILTON AVE.  
TAMPA, FL 33604 US

**New Mailing Address:**

**FEI Number:** 76-0792369

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FOXX, GEORGE J  
1503 WARMAN COURT  
TAMPA, FL 33613 US

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

FOXX, GEORGE J  
103 W HAMILTON AVE  
TAMPA, FL 33613 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: DR GEORGE FOXX

02/12/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: FOXX, GEORGE J  
Address: 1503 WARMAN COURT  
City-St-Zip: TAMPA, FL 33613 US

Title: MGR  
Name: SPEIGHTS, SHEA E  
Address: 1503 WARMAN COURT  
City-St-Zip: TAMPA, FL 33613 US

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: DR GEORGE FOXX

P

02/12/2010

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