

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000061857

FILED  
Apr 17, 2007  
Secretary of State

Entity Name: FOURDOCS INVESTMENTS, LLC

**Current Principal Place of Business:**

1705 E. HIGHWAY 50 STE. B  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

1705 E. HIGHWAY 50 STE. B  
CLERMONT, FL 34711

**New Mailing Address:**

FEI Number: 20-2986868

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HASKEL, JEFFREY S  
1735 WYCLIFF DRIVE  
ORLANDO, FL 32803 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: MGRM ( ) Delete  
Name: HASKEL, JEFFREY S  
Address: 1735 WYCLIFF DRIVE  
City-St-Zip: ORLANDO, FL 32803

Title: MGRM ( ) Delete  
Name: SORCHY, PAUL C II  
Address: 17805 BONNIEVISTA COURT  
City-St-Zip: WINTER GARDEN, FL 34787

Title: MGRM ( ) Delete  
Name: LEWIS, MICHAEL R  
Address: 2622 HARTWOOD PINES WAY  
City-St-Zip: CLERMONT, FL 34710

Title: MGRM ( ) Delete  
Name: FERRER, ALBERT  
Address: 5464-8 E. MICHIGAN ST.  
City-St-Zip: ORLANDO, FL 32812

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: PAUL C SORCHY

MGRM

04/17/2007

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