


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90203 026 ****50.00

DOCUMENT # L05000104400 1. Entity Name DOCUSOLUTIONS, LLC					
Principal Place of Business SUITE 2110 - SUNTRUST BUILDING 76 SOUTH LAURA STREET JACKSONVILLE, FL 32202			Mailing Address SUITE 2110 - SUNTRUST BUILDING 76 SOUTH LAURA STREET JACKSONVILLE, FL 32202		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent BMD FLORIDA SERVICE, LLC 76 S. LAURA STREET, SUITE 2110 JACKSONVILLE, FL 32202			7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DOCUMANAGEMENT, LLC 76 S. LAURA STREET, STE. 2110 JACKSONVILLE, FL 32202 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: <u>Anthony S. Manna</u> Anthony S. Manna, Mbr. of DocuMgm, LLC <u>3/10/06</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					



BRENNAN, MANNA & DIAMOND, LLC
ATTORNEYS & COUNSELORS AT LAW

ATTACHMENT

20015824

#L05000104400

Anna-Karina Dragolich
Phone: 330-253-5060
Fax: 330-253-1977
Email: akdragolich@bmdllc.com

March 10, 2006

Florida Department of State
Division of Corporations
PO Box 6478
Tallahassee, FL 32314

RE: DocuSolutions, LLC

Dear Sir or Madam:

Enclosed herewith please find the 2006 Annual Report for the above-referenced entity, along with a check in the amount of \$50.00 for the filing fee. Please file the same and return any receipts and/or certificates to me.

Thank you for your time and attention to this matter. Please feel free to contact me if you should have any questions.

Very truly yours,

A-K Dragolich

Anna-Karina Dragolich
Paralegal