

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000033836

Entity Name: DOC'S GARAGE, LLC

FILED  
Mar 22, 2007  
Secretary of State

**Current Principal Place of Business:**

3992 PROSPECT AVE.  
NAPLES, FL 34104

**New Principal Place of Business:**

3455 WESTVIEW DRIVE  
NAPLES, FL 34104

**Current Mailing Address:**

3992 PROSPECT AVE.  
NAPLES, FL 34104

**New Mailing Address:**

3455 WESTVIEW DRIVE  
NAPLES, FL 34104

FEI Number: 20-4755447

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

MARC F. OATES, P.A.  
5515 BRYSON DRIVE  
SUITE 502  
NAPLES, FL 34109 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 ( ) Delete  
Name: BENSYL, LARRY  
Address: 3992 PROSPECT AVE.  
City-St-Zip: NAPLES, FL 34104

Title: MGR ( ) Delete  
Name: BENSYL, JARRED  
Address: 3992 PROSPECT AVE.  
City-St-Zip: NAPLES, FL 34104

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: BENSYL, LARRY  
Address: 3455 WESTVIEW DRIVE  
City-St-Zip: NAPLES, FL 34104

Title: MGR (X) Change ( ) Addition  
Name: BENSYL, JARRED  
Address: 3455 WESTVIEW DRIVE  
City-St-Zip: NAPLES, FL 34104

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: JARRED BENSYL

MGR

03/22/2007

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