

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000066686

Entity Name: W.DOC HOLDINGS LLC

FILED
May 05, 2010
Secretary of State

Current Principal Place of Business:

7549 COLONY PALM DR
BOYNTON BEACH, FL 33436 US

New Principal Place of Business:

2500 QUANTUM LAKES DRIVE, SUITE 203
BOYNTON BEACH, FL 33426 US

Current Mailing Address:

6615 W BOYNTON BEACH BLVD, 316
BOYNTON BEACH, FL 33437

New Mailing Address:

2500 QUANTUM LAKES DRIVE, SUITE 203
BOYNTON BEACH, FL 33426 US

FEI Number: 20-5325217 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 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
Name: GIBBONS-MCINTOSH, JACQUELINE
Address: 2500 QUANTUM LAKES DRIVE, SUITE 203
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: MGR
Name: MCINTOSH, HUBERT
Address: 2500 QUANTUM LAKES DRIVE, SUITE 203
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: S
Name: GIBBONS-MCINTOSH, JACQUELINE
Address: 2500 QUANTUM LAKES DRIVE, SUITE 203
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: T
Name: MCINTOSH, HUBERT
Address: 2500 QUANTUM LAKES DRIVE, SUITE 203
City-St-Zip: BOYNTON BEACH, FL 33426

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: HMCINTOSH

MGR

05/05/2010

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