

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT (AR)

FILED
Mar 28, 2007 8:00 am
Secretary of State

03-28-2007 90186 002 ****55.00

DOCUMENT # L06000098094

1. Entity Name

DOCK GUY LLC



Principal Place of Business

Mailing Address

35711 WASHINGTON LOOP RD. LOT 185
PUNTA GORDA FL 33982
US

35711 WASHINGTON LOOP RD. LOT 185
PUNTA GORDA FL 33982
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E083 (10/06)

4. FEI Number

20-5756289

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

UNITED STATES CORPORATION AGENTS, INC.
1111 LINCOLN ROAD
SUITE 400
MIAMI BEACH FL 33139

Name

ROGER DWYER

Street Address (P.O. Box Number is Not Acceptable)

35711 WASHINGTON LOOP RD

LOT 185

City

PUNTA GORDA

FL

Zip Code

33982

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

ROGER DWYER *Roger Dwyer*

Signature, typed or printed name of registered agent and title if applicable.

NOTE: Registered Agent's Signature Required when reinstating

DATE

FILE NOW!!! FEE IS \$50.00

**Make Check Payable to Florida Department of State
Due By May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY ST-ZIP
MGRM
DWYER, ROGER
35711 WASHINGTON LOOP RD. LOT 185
PUNTA GORDA FL 33982 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST-ZIP ☐ Delete

TITLE
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CITY ST-ZIP ☐ Change ☐ Addition

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CITY ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST-ZIP ☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

ROGER DWYER *Roger Dwyer*

3/17/07 239.282.1596

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #