

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000049952

Entity Name: DOS CABALLEROS, LLC

**FILED**  
**Apr 30, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

80 NE 5TH AVE.  
DELRAY BEACH, FL 33483 US

**New Principal Place of Business:**

3450 EAST LAKE ROAD  
SUITE 307  
PALM HARBOR, FL 34685 US

**Current Mailing Address:**

80 NE 5TH AVE.  
DELRAY BEACH, FL 33483 US

**New Mailing Address:**

3450 EAST LAKE ROAD  
SUITE 307  
PALM HARBOR, FL 34685 US

FEI Number:

FEI Number Applied For (X)

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALTER H. MESSICK, P.A.  
1900 CORPORATE BLVD.  
SUITE 101 WEST  
BOCA RATON, FL 33431 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  
Name: CRAWFORD, JASON  
Address: 3450 EAST LAKE ROAD  
City-St-Zip: PALM HARBOR, FL 34685 US

Title: MGRM  
Name: WORLEY, BRAD  
Address: 3450 EAST LAKE ROAD  
City-St-Zip: PALM HARBOR, FL 34685 US

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: JASON CRAWFORD

MGRM

04/30/2011

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