

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000051122

Entity Name: DRIPSBLACK LLC

**FILED**  
**Mar 19, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

2342 PARK ST.  
4  
JACKSONVILLE, FL 32204 US

**New Principal Place of Business:**

**Current Mailing Address:**

2342 PARK ST.  
4  
JACKSONVILLE, FL 32204 US

**New Mailing Address:**

FEI Number: 26-0808738

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WALLER, WILLIAM M  
950 LAKERIDGE DR.  
ORANGE PARK, FL 32065 US

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

WALLER, WILLIAM M  
2342 PARK ST  
4  
JACKSONVILLE, FL 32204 US

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:

03/19/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WALLER, WILLIAM M II  
Address: 1302 MCDUFF AVE #4  
City-St-Zip: JACKSONVILLE, FL 32205

Title: MGRM  
Name: DOUBERLY, DANIEL S  
Address: 2569 HERSCHEL ST #2  
City-St-Zip: JACKSONVILLE, FL 32204

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: DANIEL S DOUBERLY

MGRM

03/19/2011

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