

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000105576

Entity Name: DOCMEALS, LLC

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

**Current Principal Place of Business:**

438 RIDGE FOREST CT.  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

438 RIDGE FOREST CT.  
SANFORD, FL 32771

**New Mailing Address:**

FEI Number: 26-1258703

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

O'BRIEN, CAROLYN S  
438 RIDGE FOREST CT.  
SANFORD, FL 32771 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: O'BRIEN, CAROLYN S  
Address: 438 RIDGE FOREST CT  
City-St-Zip: SANFORD, FL 32771 US

Title: MGRM  
Name: O'BRIEN, MICHAEL  
Address: 438 RIDGE FOREST CT  
City-St-Zip: SANFORD, FL 32771 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: CAROLYN S O'BRIEN

MGRM

01/19/2011

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