

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000038014

**Entity Name:** M.C. DOCUMENT SOLUTIONS, LLC

**FILED**  
**Feb 13, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

502 N. GILCHRIST AVENUE  
TAMPA, FL 33606

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 23531  
TAMPA, FL 336233531 US

**New Mailing Address:**

**FEI Number:** 26-4702675

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LASMAN, JEFFREY M  
6152 DELANCEY STATION STREET  
SUITE 205  
TAMPA, FL 33578 US

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

CARVER, MELVIN JR.  
502 N. GILCHRIST AVENUE  
TAMPA, FL 33606 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: MELVIN CARVER, JR.

02/13/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: CARVER, MELVIN JR.  
Address: 502 N. GILCHRIST AVENUE  
City-St-Zip: TAMPA, FL 33606

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: MELVIN CARVER, JR.

MGRM

02/13/2012

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