

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000081125

Entity Name: DOCSTORE, INC.

FILED  
Mar 28, 2006  
Secretary of State

## Current Principal Place of Business:

3900 U.S. HWY 1  
VERO BEACH, FL 32960 US

## New Principal Place of Business:

3900 US HIGHWAY 1  
VERO BEACH, FL 32960 US

## Current Mailing Address:

3900 U.S. HWY 1  
VERO BEACH, FL 32960 US

## New Mailing Address:

FEI Number: 59-3469497      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HENDERSON, STEVE L  
817 BEACHLAND BLVD.  
VERO BEACH, FL 32963 US

## Name and Address of New Registered Agent:

HENDERSON, STEVEN  
756 BEACHLAND BLVD  
VERO BEACH, FL 32963 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: STEVEN HENDERSON      03/28/2006  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DV ( ) Delete  
Name: LUNDEEN, ERIKA K  
Address: 3900 U.S. HWY 1  
City-St-Zip: VERO BEACH, FL 32960

Title: DP ( ) Delete  
Name: LUNDEEN, MICHAEL J  
Address: 3900 U.S. HWY 1  
City-St-Zip: VERO BEACH, FL 32960

Title: DT ( ) Delete  
Name: LUNDEEN, MATTHEW  
Address: 3900 U.S. HWY 1  
City-St-Zip: VERO BEACH, FL 32967

Title: DS ( ) Delete  
Name: COAKLEY, JOSEPH  
Address: 3900 U.S. HWY 1  
City-St-Zip: VERO BEACH, FL 32967

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DT (X) Change ( ) Addition  
Name: LUNDEEN, MATHEW D  
Address: 3900 U.S. HWY 1  
City-St-Zip: VERO BEACH, FL 32967

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHAEL LUNDEEN      P      03/28/2006  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date