2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001408

FILED May 01, 2007 Secretary of State

Entity Name: AMRIT RESIDENCES III CONDOMINIUM ASSOCIATION, INC.

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3100 NORTH OCEAN DRIVE RIVIERA BEACH, FL 33404

Current Mailing Address: New Mailing Address:

3100 NORTH OCEAN DRIVE RIVIERA BEACH, FL 33404

FEI Number: 20-8935211 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

REGISTERED AGENTS OF FLORIDA, LLC BAROT, DILIP

100 SOUTHEAST SECOND STREET SUITE 2900 4243-D NORTHLAKE BLVD

MIAMI, FL 331312130 US PALM BEACH GARDENS, FL 33410 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: DILIP BAROT 05/01/2007

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: () Change () Addition

 Name:
 SNOW, ROBERT P
 Name:

 Address:
 4243-D NORTHLAKE BLVD.
 Address:

 City-St-Zip:
 PALM BEACH GARDENS, FL 33410
 City-St-Zip:

Title: DVP () Delete Title: DVP (X) Change () Addition

Name: MASCHMIDT, KEVIN G Name: DESAI, SNEHAL

Address: 4243-D NORTHLAKE BLVD. Address: 4243-D NORTHLAKE BLVD.

City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410

 $\label{eq:title:DST} \textit{Title:} \qquad \textit{DST} \qquad \textit{()} \; \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{DST} \qquad \textit{(X)} \; \textit{Change ()} \; \textit{Addition}$

Name:KAKKAR, YASH PName:KAKKAR, YASH PALAddress:4243-D NORTHLAKE BLVD.Address:4243-D NORTHLAKE BLVD.

City-St-Zip: PALM BEACH GARDENS, FL 33410 City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: YASH PAL KAKKAR S 05/01/2007