2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P96000011927

VILLAGE III, INC.



FILED Apr 26, 2007 08:00 AM Secretary of State

Principal Place of Business

4200 GULF DORE BLVD. NORTH NAPLES, FL 34103 US

Mailing Address

4200 GULF DORE BLVD. NORTH NAPLES, FL 34103



04122007

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0669026

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CATALANO, ANTHONY J 4001 TAMIAMI TRAIL NORTH SUITE 250 NAPLES, FL 34103

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	named entity submits this statement for the $\bar{\rho}$ lions of registered agent.	ourpose of changing its registere	d office or r	egistered agent, or both, in the St	ate of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	il applicable. (NOTE: Registered	Ageni signature	required when reinstating)	DATE
FIL After M	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	_		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LUTGERT, SCOTT F 4200 GULF SHORE BLVD NORTH NAPLES, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD BAKER, RICHARD J 4200 GULF SHORE BLVD NORTH NAPLES, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTSD GUTMAN, HOWARD B 4200 GULF SHORE BLVD NORTH NAPLES. FL				T WRITE
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IN THIS SPACE

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does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes: and that my name appears in Block 10 or Block 11 if 12. I hereby certify that the information indicated on this report or supple of the corporation or the receive changed, or on an attachme her like empowered. Howard B. Gutman

SIGNATURE:

NAME STREET ADDRESS . CITY-ST-ZIP TITLE

NAME STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TED NAME OF SIGNING OFFICER OR DIRECTOR

Vice President

4/13/07

(239) 261-6100

Daytime Phone #