

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000109481

**Entity Name:** FIELDS OF DREAMS III, LLC

**Current Principal Place of Business:**

2765 LAKE DR  
SINGER ISLAND, FL 33404

**Current Mailing Address:**

515 51 STREET  
WEST PALM BEACH, FL 33407 US

**FEI Number:** 47-1929449

**Certificate of Status Desired:** No

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

WALLACE, AMY  
515 51 STREET  
WEST PALM BEACH, FL 33407 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:** AMY WALLACE

03/01/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name WALLACE, AMY L  
Address 515 51 STREET  
City-State-Zip: WESTPALM BEACH FL 33407

Title MGRM  
Name HEINE, CHRIS A  
Address 2765 LAKE DRIVE  
City-State-Zip: SINGER ISLAND FL 33404

*I hereby 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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHRIS HEINE

MANAGER

03/01/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date