## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **FILED** Jun 05, 2008 8:00 am Secretary of State

06-05-2008 90002 048 \*\*\*\*61.25

DOCL	IN	1 III NI	T #	722	4ሰሰ
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1. Entity Name



	QUARTER CONDOMINIUI	VI PHASE III, IN	IC.		į.				
Principal Place of Business PHASE III INC 4780 N. STATE RD. 7, E-250 408 N.W. 70TH AVENUE PLANTATION, FL 33317				60044053					:
2. Principal P	flace of Business - No P.O. Box #	3. Mailing Address		<del></del>					
Suite, Apt. #, etc.		Suite, Apt. #, etc	Suite, Apt. #, etc.			hg-NP	CR2E03	7 (12/06)	
City & State		City & State *	City & State *		4. FEI Number 59-146405	56			oplied For ot Applicable
Zip	Country	Zip	Country		5. Certificate of S	tatus Desired		8.75 Add ee Require	
	6. Name and Address of Current	Registered Agent	<u> </u>		7. Name and Add	iress of New F	Registered A	gent	
4780 N. S	MANAGEMENT SERVICES, I TATE ROAD 7, #E250 IALE LAKES, FL 33329	NC.	Stree		P.O. Box Number is	Not Acceptabl	e)		
			City				FL	Zip Cod	е
	named entity submits this statement for ions of registered agent.  Signature, typed or printed name of registered agent.		ng its registered office	_		the State of Fi	orida. I am fi	amiliar with,	and accept
Filing Fee is \$61.25 Due by May 1, 2008		9. Election	9. Election Campaign Financing Trust Fund Contribution.			Make check payable to Florida Department of State			
	Due by May 1, 2008		und Contribution.	· —	\$5.00 May Be Added to Fees	L .			
10.	OFFICERS AND DI	Trust F	und Contribution.		Added to Fees ADDITIONS/CHANG	Flo	rida Depart	ment of S	tate I 10
10. IITLE NAME SIREET ADDRESS CITY-ST-ZIP	OFFICERS AND DI SD KOI, EVELYN 292 NW 69TH AVENUE, #168	Trust F		Per	Added to Fees  ADDITIONS/CHANG  AND BARREY  ON GAR	ES TO OFFICE Ave	rida Depart ERS AND DIR #/63	ment of S	tate
TITLE NAME SIREET ADDRESS	OFFICERS AND DIE	Trust F	. 11. TITLE NAME STREET ADDRE	Per 3200	Added to Fees ADDITIONS/CHANG	ES TO OFFICE Ave	rida Depart ERS AND DIR #/63	ment of S	tate I 10
TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DII SD KOI, EVELYN 292 NW 69TH AVENUE, #168 PLANTATION, FL 33317 VD MARSHALL, SHARON 326 NW 69TH AVE #244	Trust F	11. TITLE NAME STREET ADDRE CITY-ST-ZIP TITLE NAME STREET ADDRE	Per 328	Added to Fees  ADDITIONS/CHANG  AND BARREY  ON GAR	ES TO OFFICE Ave	rida Depart ERS AND DIR #/63	ment of Si ECTORS IN Change Change Change	V 10 Addition Addition
TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DII SD KOI, EVELYN 292 NW 69TH AVENUE, #168 PLANTATION, FL 33317 VD MARSHALL, SHARON 326 NW 69TH AVE #244 PLANTATION, FL 33317 PD BECKMAN, ALAN 326 NW 69TH AVENUE, #143	Trust F  Delete  Delete	11.  TITLE NAME STREET ADDRE CITY-ST-ZIP TITLE NAME STREET ADDRE CITY-ST-ZIP TITLE NAME STREET ADDRE	Per 3200 SSS Plan	Added to Fees  ADDITIONS/CHANG  AND BARREY  ON GAR	ES TO OFFICE Ave	rida Depart ERS AND DIR #/63	ment of Si ECTORS IN Change Change	V 10 Audition Addition
TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	OFFICERS AND DII SD KOI, EVELYN 292 NW 69TH AVENUE, #168 PLANTATION, FL 33317 VD MARSHALL, SHARON 326 NW 69TH AVE #244 PLANTATION, FL 33317 PD BECKMAN, ALAN 326 NW 69TH AVENUE, #143 PLANTATION, FL 33317 TD PAPPAS, JOHN 312 NW 69TH AVE 152	Trust F  Delete  Delete	TILE NAME STREET ADDRE CITY-ST-ZIP TITLE NAME STREET ADDRE CITY-ST-ZIP	I Per 3-26 Plan	Added to Fees  ADDITIONS/CHANG  AND BARREY  ON GAR	ES TO OFFICE Ave	rida Depart ERS AND DIR #/63	ment of Si ECTORS IN Change Change Change	V 10 Addition Addition

12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attackment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR