2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760242

FILED Aug 04, 2009 Secretary of State

Entity Name: SUN LAKES PROPERTY OWNERS' ASSOCIATION III, INC.

Current Principal Place of Business:			New Principal Place of Business:		
P.O. BOX 5	ERFLY PLACE 5241 CENTER, FL 33571	US		FERFLY PLACE CENTER, FL 33573 US	
Current Mailing Address:			New Mailing Address:		
P.O. BOX 5 SUN CITY	5241 CENTER, FL 33571	US			
FEI Number: 59-2405766 FEI Number Applied For() FEI Number Not Applicable() Certificate of Status Desired() 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:					
WILMOUTH, MARIE B 1807 BUTTERFLY PLACE SUN CITY CENTER, FL 33573 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:					
	Electronic Signat	ture of Registered Agent		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () Delete TAYLOR, KENNETH 1502 CLOISTEN DR SUN CITY CENTER, FL 3	3573	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	PD () Delete RHODES, L.J. 1824 COLUMBINE PLACE SUN CITY CENTER, FL 3		Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	VD () Delete BELL, RUSSELL H 1812 COLUBINE PLACE SUN CITY CENTER, FL 3	3573	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SD () Delete WILMOUTH, MARIE 1807 BUTTERFLY PLACE SUN CITY CENTER, FL 3		Title: Name: Address: City-St-Zip:	STD (X) Change () Addition WILMOUTH, MARIE 1807 BUTTERFLY PLACE SUN CITY CENTER, FL 33573	
Title: Name: Address: City-St-Zip:	D (X) Delete LIOTTA, VALERIE 1828 N. PEBBLE BEACH SUN CITY CENTER, FL 3	3573	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: MARIE WILMOUTH STD 08/04/2009