2007 LIMITED PARTNERSHIP ANNUAL REPORT Due By May 1, 2007

FILED Mar 06, 2007 08:00 A **Secretary of State**

DOCUMENT # A0500000910 1. Entity Name WHITE LAKE ANNEX III, LTD.		

Principal Place of Business

3546 PLOVER AVENUE NAPLES, FL 34117

Mailing Address 3546 PLOVER AVENUE NAPLES, FL 34117

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DO NOT WRITE IN THIS SPACE

01152007 No Chg-LP CR2E003 (12/06)

4. FEI Number Applied For 16-1724084 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required

6. Name and Address of Current Registered Agent

BROCK, WILLIAM C JR 3546 PLOVER AVENUE NAPLES, FL 34117

DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, the obligations of registered agent.	in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable.	DATE
FILE NOW!!! FEE IS \$500.00 After May 1, 2007, Fee will be \$900.00	

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE. NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

GENERAL PARTNER INFORMATION 12. DOCUMENT # BROCK, WILLIAM CJR NAME STREET ADDRESS 3546 PLOVER AVE CITY+ST-ZIP NAPLES, FL 34117 DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CITY-ST-ZIP

U00000657465 03/14/07-80070-008 500.00

DO NOT WRITE IN THIS SPACE

I hereby 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620. Florida Statutes

SIGNATURE:

DOCUMENT #

CHECK NAME STREET ADDRESS CITY-ST-ZIP DOCUMENT # NAME STREET ADDRESS CiTY-ST-ZIP

ED OF PRINTED NAME OF SIGNING GENERAL PARTNER

WILLIAM C. BROCK, JR. 3/1/2007 239-643-5588

Date

Daytime Phone #