

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2007 08:00 AM
Secretary of State

DOCUMENT # L03000014739 1. Entity Name COVERED BRIDGE HOLDINGS III, LLC	
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Principal Place of Business 2411 TALLEVAST ROAD SARASOTA, FL 34243	Mailing Address PO BOX 1125 TALLEVAST, FL 34270-1125
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DO NOT WRITE IN THIS SPACE



03142007 No Chg-LLC CR2E083 (11/05)

4. FEI Number 32-0080298	Applied For
	Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

DESENBERG, TREY
 2411 TALLEVAST ROAD
 SARASOTA, FL 34243

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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00
Due by May 1, 2007

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DESENBERG, TREY 2411 TALLEVAST ROAD SARASOTA, FL 34243
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000715694
 04/27/07-80075-011 55.00

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11. I hereby certify that the information supplied with this filing 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 managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Trey Desenberg 3/21/07 941-755-3000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #