

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000035275

Entity Name: OCEANS WEST III, L.L.C.

FILED
Apr 26, 2009
Secretary of State

Current Principal Place of Business:

2901 SOUTH RIDGEWOOD AVE
SOUTH DAYTONA, FL 32119

New Principal Place of Business:

125 ANN RUSTIN DRIVE
ORMOND BEACH, FL 32176

Current Mailing Address:

2901 SOUTH RIDGEWOOD AVE
SOUTH DAYTONA, FL 32119

New Mailing Address:

125 ANN RUSTIN DRIVE
ORMOND BEACH, FL 32176

FEI Number: 56-2397081

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALDRON, EDMUND J
2901 S RIDGEWOOD AVE
SOUTH DAYTONA, FL 32119 US

Name and Address of New Registered Agent:

WALDRON, EDMUND J
125 ANN RUSTIN DRIVE
ORMOND BEACH, FL 32176 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:

04/26/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CALLAHAN, JOHN T III
Address: 2901 S RIDGEWOOD AVE
City-St-Zip: SOUTH DAYTONA, FL 32119

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CALLAHAN, JOHN T III
Address: 1053 MAITLAND CENTER COMMONS BLVD
City-St-Zip: MAITLAND, FL 32751

Title: MGR () Change (X) Addition
Name: WALDRON, EDMUND J
Address: 125 ANN RUSTIN DRIVE
City-St-Zip: ORMOND BEACH, FL 32176

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 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 608, Florida Statutes.

SIGNATURE: EDMUND J. WALDRON

MGR

04/26/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date