## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L03000050913

City-St-Zip: CAPE CORAL, FL 33914

Entity Name: DEVELOPMENT CAPE CORAL, III, L.L.C.

FILED Mar 16, 2009 Secretary of State

Current P	rincipal Place of Business:	New Principal F	New Principal Place of Business:	
	MBAS DRIVE SLAND, FL 34145			
Current Mailing Address:		New Mailing Ad	New Mailing Address:	
	MBAS DRIVE SLAND, FL 34145			
	: 13-4271747 FEI Number Applied For ( ) ce with s. 607.193(2)(b), F.S., the limited liability o	FEI Number Not Applicable company did not receive the prior		
Name and Address of Current Registered Agent:		Name and Addr	Name and Address of New Registered Agent:	
999 CAXA MARCO IS The above in the State	SLAND, FL 34145 US enamed entity submits this statement for the e of Florida.	e purpose of changing its reg	istered office or registered agent, or both	
SIGNATU	RE: LYNNE WASHBURN		Data	
	Electronic Signature of Registered A	gent	Date	
MANAGING	MEMBERS/MANAGERS:	ADDITIONS/CHANG	ES:	
Title: Name: Address: City-St-Zip:	MGR () Delete WASHBURN, LYNNE W TRUSTEE 999 CAXAMBAS DRIVE MARCO ISLAND, FL 34145	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MGRM () Delete FLAHARTY, PATRICK 11670 ROSEMONT DRIVE FT. MYERS, FL 33913	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	MGRM () Delete CASE, MICHAEL W 2710 EL DORADO PKWY	Title: Name: Address:	() 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 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.

City-St-Zip:

SIGNATURE: LYYNE WASHBURN 03/16/2009