## 2007 LIMITED LIABILITY COMPANY

SIGNATURE:

SIGNATURE AND TYPED OR PRE

## Apr 27, 2007 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # L04000005524 04-27-2007 90035 045 \*\*\*\*50.00 1. Entity Name VESTED MOTORS III. LLC Principal Place of Business Mailing Address 60042406 15802 AMBERLY DRIVE 15802 AMBERLY DRIVE **TAMPA, FL 33647** TAMPA, FL 33647 01042007No Chg-LLC CR2E083 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0627291 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent ALEXANDER, LARRY B DO NOT WRITE 505 SOUTH FLAGLER DRIVE, SUITE 1100 WEST PALM BEACH, FL 33401 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee Is \$50.00 Due by May 1, 2007 9. MANAGING MEMBERS/MANAGERS MGR TITLE ZIELENBACH, JOHN T MGR NAME STREET ADDRESS 15802 AMBERLY DRIVE TAMPA, FL 33647 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY - ST - ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 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.

ING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**FILED**