2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L04000009075

1. Entity Name

TOPFLIGHT VENTURES III, LLC



FILED
Jan 11, 2007 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

13662 PINE VILLA LANE FORT MYERS, FL 33912 13662 PINE VILLA LANE FORT MYERS, FL 33912



01082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0790482 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

ZUCKER, SHERRI W 13662 PINE VILLA LANE FORT MYERS, FL 33912

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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 Signa	ure, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent eignature required when reinstating)	DATE	

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

TITLE	MGR
NAME	ZUCKER, SHERRI W
STREET ADDRESS	13662 PINE VILLA LANE
CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE	
NAME	
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NAME	
STREET ADDRESS	

MANAGING MEMBERS/MANAGERS

01/11/07-80060-001 50.00

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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:

CITY-ST-ZIP

INATURE AND TYPED OR PRINTED NAME OF BIGNING MANA

NAME OF BIGNING MANAGING MEMBER, OR AUTHORI

1/8/07 239-489-077

Date

Daytime Phone