


**2006-LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 08, 2006 8:00 am
Secretary of State

05-08-2006 90036 039 ****50.00

DOCUMENT # L04000009113 1. Entity Name ITHAKA HOLDINGS III, LLC	
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Principal Place of Business 447 1ST AVENUE NORTH NAPLES, FL 34102	Mailing Address 447 1ST AVENUE NORTH NAPLES, FL 34102
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DO NOT WRITE IN THIS SPACE

10000000



01092006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-0726770	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent WEBRE, HAROLD J ESQ. G/O GOODLETTE, COLEMAN & JOHNSON, P.A. 4001 TAMiami TRAIL NORTH, SUITE 300 NAPLES, FL 34103 <i>Harold J. Webre, PA</i> <i>124 S. Florida Ave</i> <i>Suite 303</i> <i>Lakeland, FL 33801</i>
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**DO NOT WRITE
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. <i>Change of address only</i> SIGNATURE <i>[Signature]</i> DATE _____ <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>

**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GOLDSMITH, JAN M 447 1ST AVENUE NORTH NAPLES, FL 34102
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MALONE, LINDA R 5150 TAMiami TRAIL N #403 NAPLES, FL 34103
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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: <i>[Signature]</i> <i>JAN Goldsmith</i> <i>4/27/06</i> <i>239</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small> <small>Date</small> <small>Daytime Phone # 6489</small>
