2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L04000033313

1. Entity Name

WYNNE CAPITAL III, LLC



FILED Jan 30, 2007 08:00 AM **Secretary of State**

Principal Place of Business

8000 SOUTH US ONE, SUITE 402 PORT ST. LUCIE, FL 34952

Mailing Address 8000 SOUTH US ONE, SUITE 402 PORT ST. LUCIE, FL 34952



01112007 No Chg-LLC DO NOT WRITE IN THIS SPACE

CR2E083 (11/05)

4. FEI Number NOT APPLICABLE

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

FEE, FRANK H III 401 SOUTH INDIAN RIVER DRIVE FORT PIERCE, FL 34950

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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.

(NOTE: Registered Agent signature required when reinstating)

02/0**2/**07-80068-015 50.00

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

9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WYNNE, MATTHEW LYLE 8000 SOUTH US ONE, SUITE 402 PORT ST. LUCIE, FL 34952		
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11. I hereby	11. I hereby certify that the information supplied with this filing does not qualify for the exe		

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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 eath; 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.

thew Lyle Wynne 1/16/07 (772) 878-5513