


2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2006 8:00 am
Secretary of State

04-04-2006 90008 009 ****50.00

DOCUMENT # L05000020466 1. Entity Name TAORMINA VENTURES III, LLC					
Principal Place of Business 737 OLD TRAIL DRIVE NAPLES, FL 34103			Mailing Address 737 OLD TRAIL DRIVE NAPLES, FL 34103		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03202006 Chg-LLC CR2E083 (11/05)	
4. FEI Number 20-2562419				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent ARRIGO, JOSEPH T JR. 737 OLD TRAIL DRIVE NAPLES, FL 34103			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ _____ City _____ FL Zip Code _____		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2006		Make check payable to Florida Department of State			
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ARRIGO, JOSEPH T JR. 737 OLD TRAIL DRIVE NAPLES, FL 34103	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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: <u>Joseph T. Arrigo, Jr.</u>		<u>3/22/2006</u>		<u>239-982-3951</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>		<small>Date</small>		<small>Daytime Phone #</small>	

Joseph T. Arrigo, Jr.

ATTACHMENT 20024492



#L05000020466

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OF COUNSEL
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* BOARD CERTIFIED: WILLS, TRUSTS & ESTATES
^ CERTIFIED PUBLIC ACCOUNTANT (FL)
* ALSO ADMITTED IN IOWA

March 31, 2005

VIA CERTIFIED MAIL
7002 2410 0001 4458 1629

Division of Corporations
P.O. Box 6478
Tallahassee, FL 32314

RE: TAORMINA VENTURES, LLC
TAORMINA VENTURES I, LLC
TAORMINA VENTURES II, LLC
TAORMINA VENTURES III, LLC
TAORMINA VENTURES IV, LLC

Dear Sir or Madam:

Enclosed, please find the five original Annual Reports for the above referenced companies. Each completed annual report includes a check in the amount of \$50.00 payable to the Florida Department of State. I understand that you will be filing these before the May 1, 2006 deadline.

Should you have any questions or comments, please do not hesitate to contact me.

Kind regards,

SHEPPARD, BRETT, STEWART, HERSCH & KINSEY, P.A.


Craig R. Hersch

CRH/mkd
Enclosures

cc: Dr. Joseph Arrigo, Jr.