


**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 17, 2007 8:00 am**  
**Secretary of State**

04-17-2007 90253 003 \*\*\*\*50.00

<b>DOCUMENT # L05000042689</b> 1. Entity Name <b>METRO PARK BUILDING THREE, LLC</b>	
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Principal Place of Business <b>6000 METROWEST BLVD. SUITE 111 ORLANDO, FL 32835 US</b>	Mailing Address <b>6000 METROWEST BLVD. SUITE 111 ORLANDO, FL 32835 US</b>
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**DO NOT WRITE IN THIS SPACE**



01082007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number <b>01-0837158</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>SKORMAN, MARC 6000 METROWEST BLVD. SUITE 111 ORLANDO, FL 32835</b>
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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**Filing Fee is \$50.00  
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR SKORMAN, MARC 6000 METROWEST BLVD. SUITE 111 ORLANDO, FL 32835</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGR MEMBER KEVIN SKORMAN 6000 METROWEST BLVD SUITE 111 ORLANDO FL 32835</b>
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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.

<b>SIGNATURE:</b> <u>MARC SKORMAN, MANAGER</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	<u>4/5/07</u> <small>Date</small>	<u>407 253-2001</u> <small>Daytime Phone #</small>
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