2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Mar 31, 2008 8:00 am Secretary of State

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1. Entity Nam	MENT # L0500007(ESTORS, LLC III	0881					03-31-2008	90272 (015 ***13	8.75
Principal Plac	e of Business	Mailing Address				•	COULOU.	LU		
Principal Place of Business		-					•			
6680 MOSSY GLEN DR FORT MYERS, FL 33908		6680 MOSSY GLEN DR Fort Myers, FL 33908					1			
FUKI MTEKS	, rL 33908	PURI MIERS, FL 33	3500							
2. Principal P	face of Business - No P.O. Box #	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.							
		, ,				03202008	Chg-LLC	CR2E0	83 (12/06)	
City & State	9	City & State				4, FEI Numbe				plied For
		1 7:-				20-3166	5637			t Applicable
Zip	Country	Zip	Coun	try		5. Certificate	of Status Desired		\$5.00 Add Fee Required	itional J
	6. Name and Address of Curren	t Registered Agent				7. Name and	Address of New F		•	
				Name						
DRAGO, J				Stroot Ar	ddroen (S	O Boy Numbe	r is Not Acceptable	21		·- <u>-</u>
	SY GLEN DR			Street At	uu 6 55 (r	.O. BOX NUITIDE	is Not Acceptable	3)		
FORTMIT	ERS, FL 33-908b									
				City		<u>.</u>			Zip Code	
				City				FL	. Zip Code	,
	named entity submits this statement tions of registered agent.	for the purpose of changing	its register	ed office or	registere	ed agent, or both	h, in the State of Flo	orida. I am I	familiar with,	and accept
SIGNATURE .	Signature, typed or printed name of registered ager	to and total if applicable. (A	OTE: Bacistere	d Agent rionatu	re required	when reinstating)		DATE		
	agradure, types or printed remotive consequence agen	s and upon applicative.	TOTE: Hagistore	o rigoni algolato	ne required	nt for i ou latete fig)		- DAIL		
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	NOW!!! FEE IS \$138.75 71, 2008 Fee will be \$538.7	75				ļ		e check p a Departm	ayable to ent of State	•
			10.			1.		a Departm	ent of State	-1
After May	7 1, 2008 Fee will be \$538.7		10. TITL	<u> </u>	ΜĠ	R	ADDITIONS	Departm	ent of State	Addition
After May	1, 2008 Fee will be \$538.7	ERS/MANAGÉRS	TITL	E E	m G DRA	R 10, Jose,	ADDITIONS	Departm	ent of State	٠,
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9. TITLE NAME	MANAGING MEMB MGR DRAGO, JOSEPH D	ERS/MANAGÉRS	TITL NAM STRE	E E EET ADDRESS -ST-ZIP	mg Drag GC80 Ford	R go Jose, mossy myers	Florida	Departm	ent of State	٠,
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