

**2008 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000093226

**FILED**  
**Jul 26, 2008**  
**Secretary of State****Entity Name:** REV III, LLC**Current Principal Place of Business:**1775 EAGLE TRACE BOULEVARD WEST  
CORAL SPRINGS, FL 33071**New Principal Place of Business:****Current Mailing Address:**1775 EAGLE TRACE BOULEVARD WEST  
CORAL SPRINGS, FL 33071**New Mailing Address:****FEI Number:** 26-1824086**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**ROSENBERG, ARTHUR R  
1499 WEST PALMETTO PARK ROAD  
SUITE 300  
BOCA RATON, FL 33486 US**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:****Title:** MGR ( ) Delete  
**Name:** FRYBERGH, PHILIP  
**Address:** 1775 EAGLE TRACE BOULEVARD WEST  
**City-St-Zip:** CORAL SPRINGS, FL 33071**Title:** MGRM (X) Delete  
**Name:** PEREIRA, APARECIDA R  
**Address:** 1775 EAGLE TRACE BLVD WEST  
**City-St-Zip:** CORAL SPRINGS, FL 33071**ADDITIONS/CHANGES:****Title:** MGRM (X) Change ( ) Addition  
**Name:** FRYBERGH, PHILIP  
**Address:** 1775 EAGLE TRACE BOULEVARD WEST  
**City-St-Zip:** CORAL SPRINGS, FL 33071**Title:** ( ) Change ( ) Addition  
**Name:**  
**Address:**  
**City-St-Zip:**

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: PF

MGM

07/26/2008

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date