

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 06, 2007 8:00 am
Secretary of State

07-06-2007 90036 036 ****50.00

DOCUMENT # L05000093692

1. Entity Name
FUTURE BENEFITS III, LLC



Principal Place of Business
315 OAKLAND AVENUE
INDIALANTIC, FL 32903

Mailing Address
315 OAKLAND AVENUE
INDIALANTIC, FL 32903

DO NOT WRITE IN THIS SPACE

07022007 No Chg-LLC

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

FOUKE, GEORGE L
315 OAKLAND AVENUE
INDIALANTIC, FL 32903

**DO NOT WRITE
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 UA
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
FOUKE, GEORGE L
315 OAKLAND AVENUE
INDIALANTIC, FL 32903

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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CITY - ST - ZIP

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IN THIS SPACE**

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: George L. Fouke George L. Fouke July 2007 321-723-7550
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #