2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000102876

1. Entity Name

LANDON VENTURES III, L.L.C.

Mailing Address

255 ALHAMBRA CIRCLE, SUITE 820 CORAL GABLES, FL 33134

Principal Place of Business

255 ALHAMBRA CIRCLE, SUITE 820 CORAL GABLES, FL 33134

FILED Jan 17, 2007 08:00 AM Secretary of State



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01092007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-3859639

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable

MORGAN, CHARLES O JR 1300 NORTHWEST 167TH STREET, SUITE 3 MIAMI, FL 33169

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| 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 Plonda. | am rammar with, and accep |
|----|---|---------------------------|
| | the obligations of registered agent. | |
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| | IONATURE | |
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(NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$50.00 Due by May 1, 2007 U00000589856 01/18/07-80033-018 55.00

MANAGING MEMBERS/MANAGERS 9. MGR TITLE LANDON, R. KIRK 255 ALHAMBRA CIRCLE, SUITE 820 STREET ADDRESS CITY-ST-ZIP CORAL GABLES, FL 33134 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS

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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.

SIGNATURE:

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

1/11/07

305/442-1118

Daytime Phone #