

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000107804

FILED
Apr 19, 2006
Secretary of State

Entity Name: GOLF PARTNERS HOLDINGS III, LLC

Current Principal Place of Business:

26811 SOUTH BAY DRIVE, SUITE 240
BONITA SPRINGS, FL 34134

New Principal Place of Business:

26811 SOUTH BAY DRIVE, SUITE 350
BONITA SPRINGS, FL 34134

Current Mailing Address:

26811 SOUTH BAY DRIVE, SUITE 240
BONITA SPRINGS, FL 34134

New Mailing Address:

26811 SOUTH BAY DRIVE, SUITE 350
BONITA SPRINGS, FL 34134

FEI Number: 20-3743177

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CECIL, W. JEFFREY
5801 PELICAN BAY BLVD., SUITE 300
C/O PORTER, WRIGHT, MORRIS & ARTHUR LLP
NAPLES, FL 34108 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: ROSINUS, FRANZ J
Address: 26811 SOUTH BAY DRIVE, SUITE 240
City-St-Zip: BONITA SPRINGS, FL 34134

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: VIVEIROS, TONY
Address: 20 SANDPIPER DR.
City-St-Zip: WESTPORT, MA 02790

Title: MGRM () Change (X) Addition
Name: VIVEIROS, SUSAN
Address: 20 SANDPIPER DR.
City-St-Zip: WESTPORT, MA 02790

I hereby certify that the information supplied with this filing does not qualify for the 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: VIVEIROS TONY

MGR

04/19/2006

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