2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 24, 2007 8:00 am Secretary of State

DOCUMENT # L05000108131 1. Entity Name LDG LAKES III, LLC					04-24-2007	90116 039 ****	50.00	
5811 PELICA SUITE 209 NAPLES, FL		Mailing Address 5811 PELICAN BAY BLVD SUITE 209 NAPLES, FL 34108		11061011		1 	. 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 3 1 20 Ber Suite, Apt. #, etc.			ion Rd	01082007	Chg-LLC	CR2E083 (12/06)		
City & State Con . 1985 M			ils mi	4. FEI Numb			oplied For	
Zip 34105 Country USA Zip 117			ountry SA		e of Status Desired	\$5.00 Add	ditional	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name (
KORN, TYLER B ESQ 5811 PELICAN BAY BLVD Street Address					2 Cupitz 190 Box Number is Not Acceptable) 2 Location 100 December 100			
SUITE 209 NAPLES,		75	08 Trai	40002V	25			
			City	Naples	- .	FL Zip Coo	1,05	
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 Signature, typed or printed name of registered agent and falle if applicable. (NOTE Registered Agent signature required when reinstating) OATE								
Filing Fee is \$50.00 Due by May 1, 2007						check payable to Department of Stat	e	
9.	MANAGING MEMBER		10.		ADDITIONS/			
NAME STREET ADDRESS CITY+ST-ZIP	LG LAKEWOOD RANCH LLC 5811 PELICAN BAY BLVD, SUITE NAPLES, FL 34108	E 209	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2908 Inc Nagles H	di80 bush FL 34105	Way Grange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-S1-2IP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP	•		☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
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 trusted powered to execute this report as required by Chapter 608, Florida Statutes. SIGNATURE: Ruger C Upt 4/3/07 410 -581-9629								