

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000019861

**FILED**  
**Mar 04, 2010**  
**Secretary of State**

**Entity Name:** VITA NOVA VILLAGE III, LLC.

**Current Principal Place of Business:**

1800 SOUTH AUSTRALIAN AVENUE  
SUITE 205  
WEST PALM BEACH, FL 33409 US

**New Principal Place of Business:**

**Current Mailing Address:**

1800 SOUTH AUSTRALIAN AVENUE  
SUITE 205  
WEST PALM BEACH, FL 33409 US

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RENAISSANCE VILLAGE, INC.  
1800 SOUTH AUSTRALIAN AVENUE  
SUITE 205  
WEST PALM BEACH, FL 33409 US

**Name and Address of New Registered Agent:**

VITA NOVA, INC.  
1800 SOUTH AUSTRALIAN AVENUE  
SUITE 205  
WEST PALM BEACH, FL 33409 US

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: IRVINE NUGENT

03/04/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: CEO  
Name: VITA NOVA INC.  
Address: 1800 SOUTH AUSTRALIAN AVENUE  
City-St-Zip: WEST PALM BEACH, FL 33409 US

I hereby 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: IRVINE NUGENT, PHD.

CEO

03/04/2010

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