

**2007 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L06000022531

**FILED**  
**Jan 31, 2007**  
**Secretary of State****Entity Name:** GATE PROPERTIES III, LLC**Current Principal Place of Business:**9540 SAN JOSE BLVD  
JACKSONVILLE, FL 32257**New Principal Place of Business:****Current Mailing Address:**PO BOX 23637  
JACKSONVILLE, FL 32241**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:**MCCORMACK, JAMES E  
9540 SAN JOSE BLVD  
JACKSONVILLE, FL 32257 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: M ( ) Delete  
Name: HIEB, ALLEN E JR  
Address: 9540 SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: MP ( ) Delete  
Name: LUEDERS, JACK C JR  
Address: 9540 SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: MVAS ( ) Delete  
Name: LAMBERT, HAGEN W  
Address: 9540 SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: MST ( ) Delete  
Name: MCCORMACK, JAMES E  
Address: 9540 SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

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

**ADDITIONS/CHANGES:**

Title: M (X) Change ( ) Addition  
Name: LUEDERS, JACK C JR  
Address: 9540 SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: P (X) Change ( ) Addition  
Name: LUEDERS, JACK C JR  
Address: 9540 SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: M (X) Change ( ) Addition  
Name: RHODES, THOMAS M  
Address: 9540 SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPAS ( ) Change (X) Addition  
Name: RHODES, THOMAS M  
Address: 9540 SAN JOSE BLVD  
City-St-Zip: JACKSONVILLE, FL 32257

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:** JAMES E MCCORMACK

S

01/31/2007

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