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**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**DOCUMENT # L06000035763**

1. Entity Name  
CHASE PROPERTIES III, LLC



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

07 JUL 19 AM 8:59

Principal Place of Business  
1300 RIVERPLACE BOULEVARD, SUITE 400  
JACKSONVILLE, FL 32207

Mailing Address  
1300 RIVERPLACE BOULEVARD, SUITE 400  
JACKSONVILLE, FL 32207



2. Principal Place of Business - No P.O. Box #  
Suite, Apt. #, etc.  
City & State  
Zip Country

3. Mailing Address  
Suite, Apt. #, etc.  
City & State  
Zip Country

04252007 Chg-LLC CR2E083 (12/06)

4. FEI Number  
20-4663542

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BALANKY, MICHAEL F  
1300 RIVERPLACE BOULEVARD, SUITE 400  
JACKSONVILLE, FL 32207

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$50.00 Due by May 1, 2007

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Michael Balanky 1300 Riverplace Blvd Ste 400 Jacksonville, FL 32201	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	300103099013 05/23/07--01019--012 **250.00	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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: Michael Balanky  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_