

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000071700

Entity Name: WIN III, LLC

FILED
Mar 15, 2007
Secretary of State

Current Principal Place of Business:

1100 FIFTH AVENUE SOUTH, SUITE 210
NAPLES, FL 34102

New Principal Place of Business:

1100 FIFTH AVENUE SOUTH
SUITE 210
NAPLES, FL 34102

Current Mailing Address:

1100 FIFTH AVENUE SOUTH, SUITE 210
NAPLES, FL 34102

New Mailing Address:

1100 FIFTH AVENUE SOUTH
SUITE 210
NAPLES, FL 34102

FEI Number: 20-5306595

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ITTNER, GARY E
1100 FIFTH AVENUE SOUTH, SUITE 210
NAPLES, FL 34102 US

Name and Address of New Registered Agent:

ITTNER, GARY E
1100 FIFTH AVENUE SOUTH
SUITE 210
NAPLES, FL 34102 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: GARY E ITTNER

03/15/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: EZON, INC.,
Address: 1100 FIFTH AVENUE SOUTH, SUITE 210
City-St-Zip: NAPLES, FL 34102

Title: MGR () Delete
Name: GRIFFIN, BRUCE A
Address: 40452 BEACHNUT ROAD
City-St-Zip: LEESBURG, VA 20175

ADDITIONS/CHANGES:

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

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

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: GARY E ITTNER

SEC

03/15/2007

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