2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L06000082839

1. Entity Name

LONGVIEW PLANTATION III, LLC



FILED
May 02, 2008 08:00 Al
Secretary of State

Principal Place of Business 40 S PALAFOX PL STE 500 PENSACOLA, FL 32502 Mailing Address

PO BOX 940

GULF BREEZE, FL 32562



04092008 No Chg-LLC

CR2E083 (12/07)

4.	FEI Number
	20-5428420

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BRANNEN, DAVID A 40 SOUTH PALAFOX PLACE SUITE 500 PENSACOLA, FL 32502

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	ve named entity submits this statement for the purpose of chang lations of registered agent.	ing its registered office or registered agent, or b	oth, in the State of Florida.	I am familiar with, and accept	
tria obin	ations of registered agent.				
SIGNATURE					
	Signature, typed or printed name of registered agent and title if applicable.	(NQTE: Registered Agent signature required when reinstating)		DATE	

FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75

U00000943194 05/29/08-80050-012 138.75

9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	MGR BRANNEN, DAVID A PO BOX 960 GULF BREEZE, FL 32562			
NAME STREET ADDRESS CITY-ST-ZIP				
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11. I hereby certify that the information supplied with this filing does not qualify for the				

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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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

and A. Brannen

4130108

850 434-1700