## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000103317

Entity Name: 503 THIRD, LLC

FILED Apr 23, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

509 MELVILLE AVENUE #4 6404 MANATEE AVE TAMPA, FL 336064321 BRADENTON, FL 34209

Current Mailing Address: New Mailing Address:

509 MELVILLE AVENUE #4 PO BOX 14338

TAMPA, FL 336064321 BRADENTON, FL 34280

FEI Number: 20-5875992 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BYRNE, ROBERT T
509 MELVILLE AVENUE #4
TAMPA, FL 336064321 US
BYRNE, ROBERT T
6404 MANATEE AVE W
BRADENTON, FL 34209 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: ROBERT T. BYRNE 04/23/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

Title: MGR () Delete Title: MGR (X) Change () Addition

 Name:
 BYRNE, ROBERT T
 Name:
 BYRNE, ROBERT T

 Address:
 509 MELVILLE AVENUE #4
 Address:
 6404 MANATEE AVE W

 City-St-Zip:
 TAMPA, FL 336064321
 City-St-Zip:
 BRADENTON, FL 34209

Title: MGR ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BYRNE, ARLENE A
 Name:

 Address:
 520 58TH STREET
 Address:

 City-St-Zip:
 HOLMES BEACH, FL 34217
 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: ROBERT T. BYRNE MGR 04/23/2007