

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000121747

Entity Name: CB LANDHOLDINGS III, LLC

FILED
Apr 10, 2007
Secretary of State

Current Principal Place of Business:

12260 SW 53RD STREET
SUITE 602
COOPER CITY, FL 33330

New Principal Place of Business:

5240 S UNIVERSITY DRIVE
SUITE 102
DAVIE, FL 33328

Current Mailing Address:

12260 SW 53RD STREET
SUITE 602
COOPER CITY, FL 33330

New Mailing Address:

5240 S UNIVERSITY DRIVE
SUITE 102
DAVIE, FL 33328

FEI Number: 20-8196197

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PECKAR & ABRAMSON
1 SE 3RD AVE
SUITE 3050
MIAMI, FL 33131 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: MGRM () Delete
Name: BLESSING, DAVID C
Address: 12260 SW 53RD STREET #602
City-St-Zip: COOPER CITY, FL 33330 US

Title: MGRM () Delete
Name: CAMET, EDUARDO
Address: 12260 SW 53RD STREET #602
City-St-Zip: COOPER CITY, FL 33330

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BLESSING, DAVID C
Address: 5240 S UNIVERSITY DRIVE #102
City-St-Zip: DAVIE, FL 33328 US

Title: MGRM (X) Change () Addition
Name: CAMET, EDUARDO
Address: 5240 S UNIVERSITY DRIVE #102
City-St-Zip: DAVIE, FL 33328

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: DAVID BLESSING

MGRM

04/10/2007

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