2008 LIMITED LIABILITY COMPANY

FILED Feb 13, 2008 8:00 am Secretary of State

02-13-2008 90062 031 ***138.75

ANNUAL REPORT	
DOCUMENT # L07000072770	Z

1. Entity Nam PENINSL		TALS THREE L.L.C) .										
Principal Plac 2519 ELDEF CLEARWATE	RBERRY DRIN	V E	Mailing Address 2519 ELDERBERRY DE CLEARWATER, FL 337		S			•					
2. Principal F	Place of Busin	ness - No P.O. Box #	3. Mailing Address										
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			0210	2008	Chg-LLC	•	CR2E	083 (12	!/06)	
City & Stat	te		City & State				Numbe	57121	14				plied F t Appli
Zip		Country	Zip	Coun	try	5. Ce	rtificate (of Status Des	sired		\$5.00 Fee Re		
	6. Name	and Address of Current F	Registered Agent			7. Na	me and .	Address of	New Reg	gistered	Agent		
WATKINS	GEORGE	= p			Name								
2519 ELDI	ERBERRY	DRIVE			Street Addr	ess (P.O. Bo)	Numbe	r is Not Acce	eptable)				
					City						Zio	Code	
O. The chave		h miles als to dear the second			_					F	- '		
the obligat	lons of regist	y submits this statement for lered agent.	the purpose of changing its	register	ed office or reg	jistered agen	t, or bott	h, in the State	e of Flori	da. Ian	i familiar	with, a	and ac
SIGNATURE .	Signature, typed	or printed name of registered agent as	nd title if applicable. (NOT)	E: Registere	d Agent signalure re	quired when reins	Lating)		•	DATE			
1													
		FEE IS \$138.75 Fee will be \$538.75						F	Make lorida l		payable nent of		ı
	/ 1, 2008		S/MANAGERS	10.						Departr	nent of		·
After May 9.	MGRM	Fee will be \$538.75 MANAGING MEMBER	RS/MANAGERS	10.					lorida I	Departr	nent of	State	,
9. TITLE NAME	MGRM WATKINS	MANAGING MEMBER G, GEORGE R	·	. TITLE NAME	E				lorida I	Departr	nent of	State	
After May 9.	MGRM WATKINS 2519 ELD	MANAGING MEMBER G, GEORGE R ERBERRY DRIVE	·	NAMI STRE	E Et address				lorida I	Departr	nent of	State	
9. TITLE NAME STREET ADDRESS	MGRM WATKINS 2519 ELD	MANAGING MEMBER G, GEORGE R	☐ Delete	NAMI STRE	E F1 ADDRESS - ST-ZIP				lorida I	Departr	S Ch	State	Ac
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WATKINS 2519 ELD CLEARW MGRM WATKINS	MANAGING MEMBER S, GEORGE R SERBERRY DRIVE ATER, FL 33761 S, KATHERINE L	·	NAME STRE CITY	E ET ADDRESS - ST-ZIP				lorida I	Departr	nent of	State	
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CHIEF CON

^{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.