2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000008007

FILED Apr 28, 2008 Secretary of State

Entity Name: STONE HARBOUR III CONDOMINIUM ASSOCIATION, INC.

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

551 N. CATTLEMEN ROAD 9887 FOURTH STREET NORTH

SUITE 202 SUITE 301

SARASOTA, FL 34232 ST. PETERSBURG, FL 33702

Current Mailing Address: New Mailing Address:

9887 FOURTH STREET NORTH SUITE 301

ST. PETERSBURG, FL 33702

OFFICERS AND DIRECTORS:

FEI Number: 20-3493429 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:

SHIELDS, CHRISTOPHER J

1833 HENDRY STREET

FORT MYERS, FL 33901 US

RAMPART PROPERTIES, INC

9887 FOURTH STREET NORTH

SUITE 301

ST. PETERSBURG, FL 33701 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.

CIONATURE REPAIR CHITH

SIGNATURE: BRIAN SMITH 04/28/2008

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

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

Name: DANNA, CHARLES A JR. Name: SWEET, SALLY

Address: 551 NORTH CATTLEMAN RD SUITE 200 Address: 9887 FOURTH STREET NORTH
City-St-Zip: SARASOTA, FL 34232 City-St-Zip: ST. PETERSBURG, FL 33702

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

Name: ALLEGRA, ROBERT T Name: MCINTOSH, LOIS

Address: 551 NORTH CATTLMEN RD SUITE 200 Address: 9887 FOURTH STREET NORTH City-St-Zip: SARASOTA, FL 34232 City-St-Zip: ST. PETERSBURG, FL 33702

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

Name: CAMPBELL, MICHAEL E JR Name: HUDACHEK, JOAN

Address: 551 NORTH CATTLEMEN RD SUITE 202 Address: 9887 FOURTH STREET NORTH City-St-Zip: SARASOTA, FL 34232 City-St-Zip: ST. PETERSBURG, FL 33702

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SALLY SWEET P 04/28/2008