2008 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000008290

L FILED
Aug 04, 2008
Secretary of State

Entity Name: THE TOWNHOMES AT LIGHTHOUSE COVE III CONDOMINIUM ASSOCIATION, INC.

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

9887 FOURTH STREET NORTH 7511 CAMDEN HARBOUR DRIVE SUITE 301 BRADENTON, FL 34212

ST. PETERSBURG, FL 33702

Current Mailing Address: New Mailing Address:

9887 FOURTH STREET NORTH 4654 SR 64 EAST #118 SUITE 301 BRADENTON, FL 34208

ST. PETERSBURG, FL 33702

FEI Number: 20-3485333 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:

RAMPART PROPERTIES, INC. 9887 FOURTH STREET NORTH ST. PETERSBURG, FL 33702 US HERITAGE HARBOUR MANAGEMENT 7511 CAMDEN HARBOUR DRIVE BRADENTON, FL 34212 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: DENNIS COLLETTI 08/04/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: P (X) Change () Addition Name: WILSON, DOUG Name: WILSON, DOUGLAS

 Name:
 WILSON, DOUG
 Name:
 WILSON, DOUGLAS

 Address:
 9887 FOURTH STREET NORTH
 Address:
 4654 SR 64 EAST #118

 City-St-Zip:
 ST. PETERSBURG, FL 33702
 City-St-Zip:
 BRADENTON, FL 34208

 Name:
 Name:
 BOURESSA, DENNIS

 Address:
 Address:
 4654 SR 64 EAST #118

 City-St-Zip:
 City-St-Zip:
 BRADENTON, FL 34208

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

 Name:
 Name:
 ROTH, DAVID

 Address:
 Address:
 4654 SR 64 EAST #118

 City-St-Zip:
 City-St-Zip:
 BRADENTON, FL 34208

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

 Name:
 Name:
 CASEY BOURESSA, JANE

 Address:
 Address:
 4654 SR 64 EAST #118

 City-St-Zip:
 City-St-Zip:
 BRADENTON, FL 34208

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: DENNIS COLLETTI, AUTHORIZED AGENT AA 08/04/2008