2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22350

FILED Feb 19, 2007 Secretary of State

Entity Name: SHORELINE TERRACES III ASSOCIATION, INC.

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

2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 327795044 US

Current Mailing Address: New Mailing Address:

2180 WEST SR 434, SUITE 5000 LONGWOOD, FL 327795044 US

FEI Number: 65-0068672 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:

HAGGERTY, JOHN A HART, JAMES W JR 4400 EL CONQUISTADOR PARKWAY, #13 SENTRY MANAGEMENT INC BRADENTON, FL 34210

2180 W SR 434 STE 5000 LONGWOOD, FL 32779 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: JAMES W HART JR 02/19/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition METEALF, GANN METCALF, GARRY Name: Name: Address:

837 AUDUBON DR Address: 837 AUDUBON DR City-St-Zip: BRADENTON, FL 34209 City-St-Zip: BRADENTON, FL 34209

Title: Title: (X) Change () Addition () Delete CORBELLINI, JOHN Name: Name: CORBELLINI, JOHN

Address: 841 AUDUBON DR Address: 841 AUDUBON DR City-St-Zip: BRADENTON, FL 34209 City-St-Zip: BRADENTON, FL 34209

Title: VPD () Delete Title: **VPSD** (X) Change () Addition

HELLER, JANET Name: HELLER, JANET Name: 843 AUDUBON DRIVE WEST Address: Address: 843 AUDUBON DR City-St-Zip: BRADENTON, FL 34209 City-St-Zip: BRADENTON, FL 34209

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 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: GARRY METCALF PD 02/19/2007