2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# N43510

Entity Name: MARSH LANDING AT SAWGRASS HOMEOWNERS ASSOCIATION III, INC.

Current Principal Place of Business:

4200 MARSH LANDING BLVD.
SUITE 200
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

4200 MARSH LANDING BLVD.
SUITE 200
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-3079112 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MARSH LANDING MANAGEMENT COMPANY, INC.
4200 MARSH LANDING BLVD.
SUITE 200
JACKSONVILLE BEACH, FL 32250 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

OFFICERS AND DIRECTORS:

Title:	D	( ) Delete
Name:	DEBOLT, HARRY	
Address:	24476 HARBOUR VIEW DRIVE	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:	VD	(X) Delete
Name:	ROSE, LARRY	
Address:	100 DEER HAVEN DR.	
City-St-Zip:	PONTE VEDRA BCH, FL 32082	
Title:	PD	( ) Delete
Name:	FELLNER, WILL	
Address:	231 DEER HAVEN DR.	
City-St-Zip:	PONTE VEDRA BCH, FL 32082	
Title:	TD	( ) Delete
Name:	ROEMHILD, BUD	
Address:	247 DEER HAVEN DRIVE	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	VPD	(X) Change ( ) Addition
Name:	DEBOLT, HARRY	
Address:	24476 HARBOUR VIEW DRIVE	
City-St-Zip:	PONTE VEDRA BEACH, FL 32082	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	PD	(X) Change ( ) Addition
Name:	FELLNER, WILLIAM	
Address:	231 DEER HAVEN DR.	
City-St-Zip:	PONTE VEDRA BCH, FL 32082	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		

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: WILLIAM FELLNER P 04/24/2006

Electronic Signature of Signing Officer or Director — Date