

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2007 8:00 am
Secretary of State

01-29-2007 90083 017 ***150.00

DOCUMENT # P06000121166

1. Entity Name
VEGAS GAMES III, INC.



Principal Place of Business
**1480 PINE ISLAND RD NE
BUILDING 1, UNITS B & C
CAPE CORAL, FL 33909**

Mailing Address
**1480 PINE ISLAND RD NE
BUILDING 1, UNITS B & C
CAPE CORAL, FL 33909**

66002003



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01232007

Chg-P

CR2E034 (12/06)

City & State

City & State

4. FEI Number

20-5588950

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**DECKER, JERRY
1480 PINE ISLAND RD NE
BUILDING 1, UNITS B&C
CAPE CORAL, FL 33909**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renaming)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**P
DECKER, JERRY
1480 PINE ISLAND RD NE
CAPE CORAL, FL 33909** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
ZINGLER, CLAREY D
~~7099 INDIAN PEAKS TR~~
~~BOULDER, CO 80502~~** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**1129 Van Loon Corn. Cir # 105
Cape Coral, FL 33909** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**SEC
DONKER, JAMES L
3309 S. KERNAN AVE
APPLETON, WI 54915** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**TREA
GROND, DAVID E
1444 VALLEY RD
OSHKOSH, WI 54904** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**VP
James W. Graham #
4201 Bonita Rd # 253
Bonita, CA 91902** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

12. 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 or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Clarey D. Zingler (Clarey D. Zingler)

1-26-07 (239) 242 4321

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #