2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Mailing Address

% 9350 S. DIXIE HIGHWAY

P94000074040 **DOCUMENT #**

1. Entity Name

Principal Place of Business

% 9350 S. DIXIE HIGHWAY

SILVER BLUFF MANAGEMENT CORP. III



FILED Feb 07, 2003 8:00 am Secretary of State

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S. Name and Address of Current Registered Agent MULLER, CHARLES E II 9305 S. DIXE HIGHWAY SUITE 1550 MIAMI FL 33156 City FL Zip Code C	City & State				City & State			4.	4. FEI Number 65-0537633						
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MAMI FL 33156 City FL Zip Code 3. 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. FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE MAWE LAWRENCE, PATRICIA C STREET ADDRESS CITY-ST-2P TITLE MAME STREET ADDRESS CITY-ST-2P Change Addition MAME STREET ADDRESS CITY-ST-2P Change Addition Addi			INI			T									
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13. I horopy certify that the information supplied with this filled does not qualify for the exemption stated in Section 119 U7.300. Filling a liables. Figure certify that the another interest of the property of the proper		artifu that th	e information supplier	with this filips	does not qualify for			ed in Section	1 119.07(3)(i)	Florida Statuti	es. I further	certif	v that the	information	

indicated on this report or expellemental 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 of the receiver of 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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR

Davtime Phone #