

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

02-15-2007 90054 046 ***158.75
P95000037431

DOCUMENT # P95000037431 1. Entity Name ECOSYSTEMS LAND MITIGATION BANK III CORPORATION	
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Principal Place of Business 5104 N. ORANGE BLOSSOM TRAIL SUITE 210 ORLANDO, FL 32810	Mailing Address 5104 N. ORANGE BLOSSOM TRAIL SUITE 210 ORLANDO, FL 32810
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FILED
07 MAR 23 PM 2:35
**STATE OF FLORIDA
TALLAHASSEE, FLORIDA**

02022007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3321557	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SEITZ, HOWARD G 11392 TURTLE BCH RD NORTH PALM BEACH, FL 33408	DO NOT WRITE IN THIS SPACE
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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 reappointing) 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
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P SEITZ, HOWARD G 11392 TURTLE BCH RD NORTH PALM BEACH, FL 33408
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST GORDON, MARGARET POB 222 COLD SPRING, NY 10516
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for 3/23

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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: *Howard G Seitz* **3/12/07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #