2004 FOR PROFIT CORPORATION

Apr 29, 2004 08:00 AM Secretary of State **ANNUAL REPORT** DOCUMENT # P96000011927 1. Entity Name VILLAGE III. INC. Principal Place of Business Mailing Address 4200 GULF DORE BLVD. NORTH 4200 GULF DORE BLVD. NORTH NAPLES, FL 34103 US NAPLES, FL 34103 03112004 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0669026 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CATALANO, ANTHONY J DO NOT WRITE 4001 TAMIAMI TRAIL NORTH **SUITE 250** IN THIS SPACE NAPLES, FL 34103 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 reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution Added to Fees 10. OFFICERS AND DIRECTORS HE LUTGERT, SCOTT F MAME STREET ADDRESS 4200 GULF SHORE BLVD NORTH U000000141172 CITY-ST-ZIP NAPLES, FL 04/29/04-80191-017 150.00 VSD TITLE BAKER, RICHARD J NAME STREET ADDRESS 4200 GULF SHORE BLVD NORTH CON'-ST-ZIP NAPLES, FL VTSD TITLE GUTMAN, HOWARD B NAME STREET ADDRESS 4200 GULF SHORE BLVD NORTH DO NOT WRITE CHY-SI-ZIP NAPLES, FL IN THIS SPACE FIFLE STREET ADDRESS CITY-ST-ZIP IIILE NAME STREET ADDRESS

does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if new like empowered. I hereby certify that the information s indicated on this report or supplement of the corporation of the rec changed, or on an attachme

Howard B. Gutman

SIGNATURE:

CITY-ST-ZIP TITLE

STREET ADDRESS CRY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(239) 261-6100

FILED

Chrysima Phone #