

2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

DOCUMENT # A97000001719

1. Entity Name
WORTHWHILE DEVELOPMENT III, LTD.



Principal Place of Business
**2933 W SR 434, SUITE 101
 LONGWOOD, FL 32779**

Mailing Address
**2933 W SR 434, SUITE 101
 LONGWOOD, FL 32779**

FILED
Apr 27, 2006 08:00 AM
Secretary of State



01302006 No Chg-LP CR2E003 (11/05)

4. FEI Number 59-3464682	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**ROYALL, H J JR.
 2933 W SR 434, SUITE 101
 LONGWOOD, FL 32779**

**DO NOT WRITE
 IN THIS SPACE**

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.

DATE

**FILE NOW!!! FEE IS \$500.00
 After May 1, 2006, Fee will be \$900.00**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
 NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT # **P97000006224**
 NAME **WORTHWHILE DEVELOPMENT III, INC.**
 STREET ADDRESS **2933 W SR 434, SUITE 101**
 CITY-ST-ZIP **LONGWOOD, FL 32779**

DOCUMENT #
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

**000000540147
 05/10/06-00005-010 508.75**

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 NAME
 STREET ADDRESS
 CITY-ST-ZIP

14. 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 is true and accurate and that my signature shall have the same legal effect as it made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 626, Florida Statutes

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

425-26

407-774-4343

Date

Daytime Phone #