2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State

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Entity Name: JACK RICE INSURANCE III, LLC

Current Principal Place of Business:

13080 S. BELCHER ROAD, SUITE H
LARGO, FL 33773

New Principal Place of Business:

Current Mailing Address:

13080 S. BELCHER ROAD, SUITE H
LARGO, FL 33773

New Mailing Address:

FEI Number: 26-0450087 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURKE, ROBERT C JR
412 E. TARPON AVENUE
TARPON SPRINGS, FL 34689 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: RICE,, JACQUELINE F MRMR
Address: 14261 LARK COURT
City-St-Zip: CLEARWATER, FL 33762 US

Title: MGR
Name: RICE, JR, JACK S VP
Address: 3528 SHORELINE CIRCLE
City-St-Zip: PALM HARBOR, FL 34684 US

Title: MGR
Name: WEBSTER, CYNTHIA M VP
Address: 2289 PINNACLE CIRCLE
City-St-Zip: PALM HARBOR, FL 34684

Title: MGR
Name: GROBMYER, JR, JAMES E VP
Address: 775 35TH AVENUE NORTH
City-St-Zip: ST. PETERSBURG, FL 33704 US

Title: MGR
Name: LETTELLEIR, MARK P VP
Address: 9455 KOGER BLVD, SUITE 200
City-St-Zip: ST. PETERSBURG, FL 33702 US

Title: MGR
Name: SELTZER, MARJORIE VP
Address: 9455 KOGER BLVD. SUITE 200
City-St-Zip: ST. PETERSBURG, FL 33702 US

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.

SIGNATURE: JACQUELINE F. RICE MRMR 04/05/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date