2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000014414

1. Entity Name EBK PROPERTIES III, INC.



FILED Apr 10, 2007 08:00 A Secretary of State

Principal Place of Business 5510 W. LASALLE ST SUITE 210 TAMPA, FL 33607 US Mailing Address 5510 W. LASALLE ST SUITE 210 TAMPA, FL 33607 US



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01042007	No Chg-P	CR2E034 (11/05)		
4. FEI Number			Applied For	
59-3427329			Not Applicable	

5. Certificate of Status Desired

\$8.75 Additional Fee Required

OLSON, PAUL E 1776 RINGLING BLVD. SARASOTA, FL 34236

DO NOT WRITE IN THIS SPACE

			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 bite if applicable. (NOTE: Registered Agent signature required when reinstating) DATE							
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00		9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees			
10.	, OFFICERS AND DIREC	CTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KNIPPERS, EUGENE B. 5510 W. LASALLE ST, SUITE 210 TAMPA, FL 33607				U00000698860 04/19/07-80019-015 150.00		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ALLRED, BRIAN M. 5510 W. LASALLE ST, SUITE 210 TAMPA, FL 33607			,			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP	• . ,	_		Leader Colored	4 (v. 174) - 16 (v. 174) 14		
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 receipt 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.							

Brian Allred

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR