2008 FOR PROFIT CORPORATION ANNUAL REPORT

ANNUAL REPORT									FILER	1		
DOCUMENT # P9700068224 1. Entity Name WORTHWHILE DEVELOPMENT III, INC.								DIVISION	TARY 0 OF COR	F STATE PORATION		
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Principal Place of Business Mailing Address . 1110 DOUGLAS AVE. SUITE 2050 1110 DOUGLAS AVE. SUITE ALTAMONTE SPRINGS, FL 32714 US ALTAMONTE SPRINGS, FL						US						
O Dain aire at Di	In and Drivela	Ne BO Bout										
2. Principal Place of Business - No P.O. Box # 3. Mailing Address 365 WEKIVA SORINGS RO 365 WEKIVA SP						USRO		IBNI IBBN BBNI BBNI BBN				
Suite, Apt.	#, etc.		Suite, Apt. #, etc. SUITE 231				01282008	Chg-P	CR2E0	34 (12/06)		
City & State	e /		City & State				4. FEI Numbe				plied For	
Longu Zip	100d	Country	Londwood, FL Zip Country				SR 75 Additional				t Applicable	
3277		USA	32779 0			17		of Status Desired	Fee Required			
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name												
ROYALL, H. J. JR 1110 DOUGLAS AVE SUITE 2050					Street Address (P.O. Box Number is Not Acceptable) 365 WEKINA SOR INS ROAD							
ALTAMON	ITE SPRIN		SUI			C 231			7.0.1			
						-0060			FL	Zip Code	<i>779</i>	
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, typod or brinted name of registered agent and title if expitable. (NOTE: Registered Agent signature required when reinstating) OATE												
Signature, typod or brinted name of registered agent and title if expeciable. (NOTE: Registered Agent signature required when reinstating) OATE												
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 9. Election Campaign Financing												
10.	······································	OFFICERS AND [11.				CHANGES TO OFF	ICERS AND			
TITLE NAME	PSTD Delete :						TD YALL, H.	J. JR		Change .	☐ Addition	
STREET ADDRESS	1110 DOUGLAS AVE							J JR VA SPR			170 231	
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32714					10	NEWOOD	FL 3	277	☐ Change	Addition	
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STREET ADDRESS				\$TR	EET ADDF						į	
CITY-ST-ZIP	certify that th	ne information europlied with	this filing does not qualify for	or the ex	Y-ST-ZIP cemptic	one contain	ed in Chaoter 119	. Florida Statutes	L further cer	tify that the li	ntormation	
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												
SIGNAT	SIGNATURE: 4/11/08 407-774-030											
		SIGNATURE AND TYPED OR P	BINTED NAME OF SIGNING OFFICER	OR DIREC	CTOR			Date	ı	Daytime Phone #		

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